Reproductive Health and Level of Awareness and Wellness Among Selected Schools in Metro Manila: A Correlational Study

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ABSTRACT: The purpose of this study was to identify the demographic profile of the respondents, find out the level of awareness about the topical aspect of the reproductive health, determine the degree of open communication and impart among the students the purpose of reproductive health to promote health and educate students into responsible parenthood. The descriptive method particularly correlational survey was used in the study in four different schools as recommended by the Division of City Schools Manila. Percentage distributions, weighted mean, and Friedman two-way analysis of variance were used for the statistical treatment of the study. The results showed that out of 100 respondents coming from four selected schools in Metro Manila, the level of awareness about the topical aspect of reproductive health was very high. Majority (87%) of the respondents were 13-15 years old while the remaining 13% were in the bracket of 16-18 years old. External factor that placed a great impact on the respondents' personal convictions about reproductive health was education. Degree of open communication in terms of reproductive health was considered significant. Significant relationship existed between the perceived vitality of reproductive health and level of awareness and wellness among selected high school students. It is recommended that open communication between parents and children should be emphasised. The health educators should aware and take into consideration the respondents traditions and beliefs about reproductive health.

Keywords: Reproductive health, level of awareness, wellness

Introduction

One of the most controversial issues confronting the Philippines today is about reproductive health. Many written materials and publications are available asserting about elements of reproductive health with different perspectives. Their ultimate goal is to improve quality of life and provide for sustainable human development. The Philippines is a signatory country of the International Conference Plan of Action of Reproductive Health in Cairo in 1994. The primary goal is achieving “Better Quality of Life Among Filipinos”. Reproductive health ensures a more efficient and effective referral system from primary to tertiary, public and private facilities.

The elements that are crucial to reproductive health are as follows: (1) family planning, (2) maternal and child health and nutrition, (3) prevention and management of reproductive tract infections including sexually transmitted infections and HIV/AIDS, (4) adolescent reproductive health, (5) prevention and management of abortion and its complications, (6) prevention and management of breast and reproductive tract cancers and other gynecological conditions, (7) education and counseling on sexuality and sexual health men’s reproductive health involvement, (8)
adolescent reproductive health, (9) violence against women and children, and lastly (10) prevention and management of infertility and sexual dysfunction.

This study provides a framework that could serve as a guide for individuals in order to promote wellness in certain stage of life. It comprises of broad topics namely: family planning, safe motherhood, male and female reproductive health, prevention of Sexually Transmitted Disease, and other areas. The main purpose of this study was to facilitate a process by which certain age groups are empowered to increase awareness and to take their action to better meet their own reproductive health needs and for attaining a better quality of life.

Three important variables were the independent variable, intervening variable and the dependent variable. The independent variable which was the cause/stimulus of the study was reproductive health where in this was apparently the intervention in the population, intervention and outcome method. The intervening could either strengthen or weaken the variables of the study. The intervening variables were: (1) demographic variables of the respondent’s namely: gender, age, year level, religion, and external factors that places a great impact on the respondent’s own personal convictions or beliefs about reproductive health and (2) degree of open communication in order to identify the significant relationship between the perceived vitality of reproductive health and level of awareness and wellness among selected high school students in Metro Manila.

The issue of reproductive health in Philippines was controversial as seen in many articles and publications. The curiosity about the controversy motivated the researcher to seek what is unknown and to justify the problem through a means of research. Furthermore, many young adolescents were increasingly vulnerable to teenage pregnancies. Thus the researcher also intended to identify the relationship between the vitality of reproductive health and level of awareness and wellness among selected schools in Metro Manila.

The population of interest came from four different schools in Metro Manila S.Y. 2011-2012. The school was dissected into the public school and the private school. The two public schools are Victorino Mapa High School, located in San Rafael St., San Miguel and E. Rodriguez Vocational High School, located in Nagtahan, Sampaloc. The two private schools are Montessori De San Juan, located On Montessori Lane, San Juan and National University, located in M.F. Jhocson St., Sampaloc. The entire population of the respondents was 131 high school students with an age range between 13 and 18 years old.

Through the aid of Slovin’s formula, 100 samples were identified. 100 representatives of the sample were drawn using fish bowl technique. The year level selected by the researcher were the third and fourth year high school students.

According to Lagman (2008) the reproductive health (RH) bill promotes information on and access to both natural and modern family planning methods, which are medically safe and legally
permissible. It assures an enabling environment where women and couples have the freedom of informed choice on the mode of family planning they want to adopt based on their needs, personal convictions and religious beliefs. The Coverage of Reproductive Health includes (Lagman, 2008): (1) information and access to natural and modern family planning, (2) maternal, infant and child health and nutrition, (3) promotion of breast feeding, (4) prevention of abortion and management of post-abortion complications, (5) adolescent and youth health, (6) prevention and management of reproductive tract infections, hiv/aids and stds, (7) elimination of violence against women (8) counseling on sexuality and sexual and reproductive health, (9) treatment of breast and reproductive tract cancers, (10) male involvement and participation in rh, (11) prevention and treatment of infertility, and (12) RH education for the youth.

Doronila (2010) stated that the government of the Philippines might give assistance to families who need contraceptives to limit the number of their children. Stated by President Aquino (2010) “We are all guided by our consciences; the state’s duty is to educate our families as to their responsibilities and to respect their decisions if they are in conformity with our laws.” Fundamental differences hold the intervention of contraceptives takes place before the conception of human life that is before a human fetus is formed. Therefore, according to this view, there is no human life aborted by contraceptives (Aquino administration, 2010). Doronilas (2010) has bearing on the present study because the cause of the problem may be due to low level of awareness or being unaware about reproductive health. Such attitudes make the high school students vulnerable to teenage pregnancies and other reproductive health problems. These problems may be resolved by giving information, education, and proper communication or counseling.

Sarkozy (2010) recognised that low levels of access to contraception and lack of control over reproductive choices and health decision-making often mean that Indian women give birth too early in life and too frequently. The author also identified four reproductive rights namely: (1) reproductive health as a part of overall health, throughout the life cycle, for both men and women, (2) reproductive executive counting voluntary choice in marriage, family formation and determination of the number, timing and spacing of one's children and the right to have access to the in sequence and means desirable to exercise voluntary choice (3) equality and evenhandedness for men and women, to allow individuals to make free and informed choice in all sphere of life, free from bias based on gender, and (4) sexual and reproductive refuge, including freedom from sexual violence and coercion, and the correct to privacy.

In a study by Baldwin et al. (2008) throughout 2001, nearly all 14-18-year-olds and a majority of 12-year-olds were aware of emergency contraceptives (EC). Among 12-14-year-olds, a slight increase in awareness between 1999 and 2003 was observed but this was not related to non-prescription status. Health-compromising behavior (alcohol use, smoking), dating and having better school achievement were related to higher awareness of emergency contraceptives. 9 % of 14-18-year-olds had used emergency contraceptives once and 1% with three times or more. No statistically significant change in emergency contraceptive use was found after non-prescription status. EC uses increased with increasing alcohol consumption, particularly at age 14.
Smoking, dating, and poor school achievement was related to increased use as well as not living in a nuclear family. A lower use was observed if living in rural area or father's education was high. Mother's education was not related to use.

In 2007, Fawole conducted a study on overall knowledge of adolescent reproductive health (ARH) revealed that most applications of peer education combine many different messages concerning adolescent reproductive health. Outcome evaluations clearly indicate an increased level of awareness and knowledge about ARH. For instance, an evaluation of the West African Youth Initiative in Nigeria and Ghana “indicates significant positive effects of program participants’ knowledge, perceived self-efficacy, and behaviour”. A peer education effort in Sri Lanka reported that over 50,000 adolescents in predominantly rural areas had been reached with information concerning adolescent reproductive health issues. A similar effort in Cambodia reported that 2000 young people had received critical ARH information through just one activity of its Youth RH Program.

Justification of the present study

The researcher gathered many insights from the foregoing studies which had direct bearing on the study. However, the present study differed from these related studies because it attempted to determine the significant relationship between perceived vitality of reproductive health and level of awareness and wellness among high school students in selected schools in Metro Manila. It covered the respondent’s profile, external factors that place a great influence on the respondent’s personal convictions, level of awareness about the topical aspect of reproductive health, degree of open communication, and the significant relationship between the level of awareness and vitality of reproductive health among high school students. Moreover, the present study covered students both in public and private schools in Metro Manila.

Research design

The study utilised Descriptive Correlational. Correlation analysis is utilised to determine the relationship between two variables. Descriptive method is designed for the researcher to gather information about present existing conditions, useful in proving the value of facts, and that the principal aspires in employing this method is to describe the nature of a situation as it exists at a time of the study and discover the origins of fastidious phenomena. The use of this method is based on its appropriateness to the purpose of the study. This method is appropriate in the study as it permits to determine the significant relationship between the perceived vitality of reproductive health and level of awareness and wellness among selected high school students in Metro Manila.

Research instruments and tools

The survey questionnaire and Likert scale was the primary instrument for data gathering. The questionnaire and Likert scale were constructed and self-made by the researcher and was sought for Professional is reviewed and approved for the validity and reliability of the test. The researcher took into consideration the data or information required to satisfy the query raise in the statement of the problem. The survey questionnaire comprised of five major parts. Part I was designed to determine the demographic Profile of the respondents like gender, age, year level, and religion. In part II, a factor that places a great impact on the
respondent’s personal convictions about reproductive health was included. Part III was about level of awareness about the topical aspect of reproductive health such as body awareness, gender awareness, sexuality awareness and pregnancy risks awareness. Part IV covered open communication, and Part V comprised of knowledge about the importance of reproductive health. All parts of the questionnaire are designed to obtain answers or responses that pertain to issues raised in this study. The qualitative response was interpreted using Likert Scale methods to test the Level of Awareness among the respondents of the following about the Topical Aspect of Reproductive Health: (a) Body Awareness, (b) Gender Awareness, (c) Sexuality Awareness and (d) Pregnancy Risks Awareness. The Degree of Open Communication among selected high school students about reproductive health and the Significant Relationship between the Perceived Vitality of Reproductive Health and Level of Awareness and Wellness among selected high school students, the interpretation run as follows:

1. **The Level of Awareness among the respondents of the following about the Topical aspect of Reproductive Health:** (a) Body Awareness, (b) Gender Awareness, (c) Sexuality Awareness and (d) Pregnancy Risks Awareness.

2. **The Degree of Open Communication and Relationship between the Perceived Vitality of Reproductive Health and Level of Awareness and Wellness among selected high school students.**

During pretest, the survey questionnaire was utilized as a guide for the purpose of clarifying responses in a questionnaire that is vague for the respondents. It complemented the information gathered through the questionnaire.

**Statistical treatment of the data**

Descriptive Statistics, t-test, and Spearman rho correlation were used to analyse the data in the survey. The following procedures are undertaken: Percentage Distribution was used for the demographic profile of the subject with the use of this formula: Weighted Average/mean of level of awareness about the topical aspect of reproductive health and degree of open communication was computed as classified with this formula: Standard Deviation or measures of dispersion away from the average in terms of level of awareness about topical aspect of reproductive health and degree of open communication was computed with the aid of this formula: Friedman two-way Analysis of Variance (ANOVA) was used to determine the significant relationship between the perceived vitality of reproductive health and level of awareness and wellness among high school students. It is an inferential biostatistical tool used in descriptive research appropriate for both bivariate and multivariate.

**Factors that places a great impact on the respondent’s personal convictions about reproductive health**

**FIGURE 1** shows the line graph of external factors among respondent’s about reproductive health in selected schools in Metro Manila.

**External Factors**

It involved aspects that considerably influence every individual’s perception about reproductive health. Through the utilization of percentage distribution, outcome showed that the respondent’s chose education as the first rank, thus
supervision of parents or guardian is in the second rank, followed by Religion on its third rank, and lastly the peer’s or friends perception as the fourth rank.

**FIGURE 1:** The distribution of the respondent’s according to external factors selected schools in Metro Manila A.Y. 2011-2012, n=100

*Onset of puberty*

The results showed that the mean score of body awareness in relation to onset of puberty in selected schools in Metro Manila was 4.27 or “very aware”. This implied that the majority of the respondents **TABLE 1** show the mean and level of awareness among respondents in relation to onset of puberty in selected schools in Metro Manila A.Y. 2011-2012.

**FIGURE 2** presents the histogram on the respondent’s level of awareness in relation to onset of puberty in selected schools in Metro Manila A.Y. 2011-2012. The computed mean value is 4.27 as the measures of variability, the outcome showed that the measure of standard deviation was 0.962 or right skewed distribution which indicate an increased value of the mean and interpreted as “positive” value.

**FIGURE 2:** Histogram on respondent’s level of awareness in relation to onset of puberty, selected schools in Metro Manila A.Y. 2011-2012, n=100
Adolescent Period

Using weighted mean, the results showed that the mean score of level of awareness among respondents in relation to adolescent period including the normal physiological changes during the said stage of development was 4.19 or “very aware”. TABLE 1 illustrates the mean and level of awareness among respondents in relation to adolescent period in selected schools in Metro Manila A.Y. 2011-2012.

Proper Self-Care Approach

By means of weighted mean, the outcome exemplified that the mean score of level of awareness among respondents in relation to proper self-care approach was 4.75 or “extremely aware”. TABLE 1 presents mean and level of awareness among respondents in relation to proper self-care approach in selected schools in Metro Manila A.Y. 2011-2012.

FIGURE 3 portrays the histogram on respondent’s level of awareness in relation to proper self-care approach in selected schools in Metro Manila A.Y. 2011-2012. In terms of proper self-care approach the mean value is 4.75 as the outcome showed that the standard deviation score was 0.687 or right skewed distribution or the mean has increased its value than of mode and interpreted as “positive” value.

FIGURE 4 illustrates the histogram on respondent’s level of awareness in relation to self-respect in every individual, in selected schools in Metro Manila S.Y. 2011-2012. The computed mean value is 4.50 as the measures of variability, the results showed that measures of standard deviation was 0.745 or right skewed distribution which signifies an increased value of mean and interpreted as “positive” value.
TABLE 1: Significant relationship between essentiality of reproductive health in relation to normal physiological changes of the body and body awareness, selected schools in Metro Manila, S.Y. 2011-2012, n=100

<table>
<thead>
<tr>
<th>Description</th>
<th>F - Value</th>
<th>Sig. Value</th>
<th>Decision on HO</th>
<th>Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am aware of the changes in my body since puberty</td>
<td>2.505</td>
<td>.064</td>
<td>Reject</td>
<td>Significant</td>
</tr>
<tr>
<td>I am aware of the body changes which normally and not normally happen during adolescent period</td>
<td>6.155</td>
<td>.001</td>
<td>Reject</td>
<td>Significant</td>
</tr>
<tr>
<td>I am aware of proper self-care approach</td>
<td>9.050</td>
<td>.001</td>
<td>Reject</td>
<td>Significant</td>
</tr>
</tbody>
</table>

The table signifies the level of a significant relationship between the vitality of reproductive health and level of awareness and wellness among selected high school students. The F – Value signifies the computed value while “sig” signifies the tabular value and Ho is accepted or reject. It illustrated that the perception of the respondents as to the body awareness in changes of body since puberty with the understanding reproductive health has a sig value of .064 with Ho accepted. In discussing in the body awareness of changes during adolescent on selected high school students with the sig value of .001 with Ho rejected. In discussing the body awareness of proper self -scare in the relationship of understanding reproductive health with the sig value of .000 was Ho rejected. Therefore there is no significant difference in the relationship in terms of understanding reproductive health and the changes of body awareness during the puberty stage. While there is a significant relationship between in understanding reproductive health and the awareness in changes of body which normally and not normally happen and also with the proper self-care approach.

TABLE 2: Significant relationship between students perception of reproductive health in relation to preparation for responsible parenthood and body awareness, selected schools in Metro Manila, A.Y. 2011-2012, n=100

<table>
<thead>
<tr>
<th>Description</th>
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<th>Sig Value</th>
<th>Decision on HO</th>
<th>Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am aware of the changes in my body since puberty</td>
<td>3.347</td>
<td>.13</td>
<td>Reject</td>
<td>Significant</td>
</tr>
<tr>
<td>I am aware of the body changes which normally and not normally happen during adolescent period</td>
<td>4.882</td>
<td>.001</td>
<td>Reject</td>
<td>Significant</td>
</tr>
<tr>
<td>I am aware of proper self care approaches</td>
<td>5.465</td>
<td>.001</td>
<td>Reject</td>
<td>Significant</td>
</tr>
</tbody>
</table>
Table 2 indicates the level of a significant relationship between the vitality of reproductive health and level of awareness and wellness among selected high school students. The F – value signifies the computed value while “sig” signifies the tabular value and Ho is accepted or rejected. It illustrated that the perception of the respondents as to the body awareness in changes of body since puberty with the understanding reproductive health has a significant value of .013 with Ho rejected. In discussing in the body awareness of changes during the adolescent on selected high school students with the sign value of .001 with Ho rejected. In discussing the body awareness of proper self - scares in the relationship of understanding reproductive health with the sig value of .001 Ho was rejected. Therefore there is a significant relationship in terms of understanding reproductive health and the level of body awareness in considering reproductive health as vital for a student in preparation for responsible parenthood, avoidance of unintended pregnancy, and prevention of contracting disease.

**TABLE 3:** Significant relationship of student’s perception about reproductive health in relation to controlling the state’s population and body awareness, selected schools in Metro Manila, A.Y.2011-2012, n=100

<table>
<thead>
<tr>
<th>Description</th>
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<th>Sig. Value</th>
<th>Decision on HO</th>
<th>Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>I observed the importance of self-respect in every person’s own individuality</td>
<td>2.928</td>
<td>.025</td>
<td>Reject</td>
<td>Significance</td>
</tr>
<tr>
<td>I respect others as I respect myself for being part of our society in spite of the different culture and religion that we originate with</td>
<td>2.625</td>
<td>.038</td>
<td>Reject</td>
<td>Significant</td>
</tr>
<tr>
<td>With my age, I can discern practices that are immoral, inhuman and dangerous</td>
<td>4.640</td>
<td>.002</td>
<td>Reject</td>
<td>Significant</td>
</tr>
</tbody>
</table>

Table 3 implies the level of significant relationship between the vitality of reproductive health and level of awareness and wellness among selected high school students. The F – Value signifies the computed value while “sig” signifies the tabular value and Ho is accepted or rejected. It illustrated that the perception of the respondents as to the gender awareness in the importance of self-respect in every person’s own individuality in the understanding reproductive health has a sig value of .025 with Ho rejected. In discussing in the gender awareness of changes as respecting others as you respect yourself for being part of our society in spite of the different culture and religion that we originate with the sig value of .038 with Ho rejected. In discussing the gender awareness in terms of age discerning practices that are immoral, inhuman and dangerous with the sig value of .002 where Ho was rejected.

Therefore there is a significant difference in the relationship in terms of understanding reproductive health towards gender awareness of selected high school students.
TABLE 4: Significant relationship between artificial family planning method in relation to mortality and morbidity rate of sexually transmitted disease and sexuality awareness, selected schools in Metro Manila, S.Y.2011-2012, n=100

<table>
<thead>
<tr>
<th>Description</th>
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<th>Sig Value</th>
<th>Decision on HO</th>
<th>Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am concerned with myself on how I can be attractive to others</td>
<td>.740</td>
<td>.567</td>
<td>Accept</td>
<td>Not Significant</td>
</tr>
<tr>
<td>I am aware with intimate relationship that involves conception</td>
<td>3.662</td>
<td>.008</td>
<td>Reject</td>
<td>Significant</td>
</tr>
<tr>
<td>I can only talk about reproductive health with my peers and consider their opinions about reproductive health without assuring if it is true</td>
<td>.731</td>
<td>.573</td>
<td>Accept</td>
<td>Significant</td>
</tr>
</tbody>
</table>

Table 4 reveals the level of significant relationship between the vitality of reproductive health and level of awareness and wellness among selected high school students. The F – Value signifies the computed value while “sig” signifies the tabular value and Ho is accepted or rejected. It illustrated that the perception of the respondents as to the sexual awareness concerning yourself on how can you be attractive to others has a sig value of .567 with Ho accepted. It illustrated that the perception of the respondents as to pregnancy risks awareness with intimate relationship that involves conception has a sig value of .008 with Ho rejected. In the sexual awareness of reproductive health with my peers and consider their opinions about reproductive health has a sig value of .573 with Ho accepted. Therefore there is no significant difference in the relationship in terms of understanding reproductive health and the level of sexual awareness and wellness among selected high school students.

Summary of findings

Based on the results of the study, the following data and information are generated:

The respondent’s personal demographic profile was identified in terms of gender, age, year level and religion. Most of the respondents or 54% are female thus majority or 87% lies from the age range of 13-15 years old, furthermore majority compromised by with 59% on the third year level, along this lines almost of the respondents or 85% are Roman Catholic.

The first rank was “Education” as the external factor that places a great impact among the respondents own personal convictions about reproductive health.

The level of awareness about the topical aspects of reproductive health was determined. In terms of body awareness and gender awareness most of the respondents are “extremely aware” thus in association with sexuality awareness most of the respondents are “moderately aware” and on the other hand in relation to pregnancy risks awareness most of the respondents are “very aware”.

The degree of open communication among the respondents about reproductive health was considered “significant”.

There is significant relationship between the perceived vitality of reproductive health and level of awareness and wellness among high school students in Metro Manila. This meant that the level of awareness among high school students in selected schools in Metro Manila shows significant relationship to perceived vitality of reproductive health.
Conclusions

Based on the findings the following conclusions could be made:
1. The respondents are extremely aware in terms of body awareness and gender awareness, moderately aware in relation to sexuality awareness, and very aware in terms of pregnancy risks awareness. Therefore, null hypothesis is rejected.
2. The mean degree of open communication among the respondents about reproductive health was considered “significant”. Therefore, null hypothesis is rejected.
3. Significant relationship existed between the perceived vitality of reproductive health and level of awareness and wellness among high school students in selected schools in Metro Manila. This meant that the level of awareness among high school students in selected schools in Metro Manila shows significant relationship to perceived vitality of reproductive health. Therefore, the null hypothesis is rejected.

Recommendations

Based on the summary of findings and conclusions drawn, the following points are recommended:

   a) To the respondents, particularly to the adolescents, health education with the use of health teaching with regards to the necessary information about reproductive health including how those individual adapt to his or her sexual environment; to know what is the advantages and disadvantages of reproductive health as they are being aware of, and what is the effect of it to them.

   b) To the parents, who use to be the guardian of the said respondents, to have open communication with their children to assess changes, problems or any conflicts, and so as to support their child by discussing every topics they are intended to know about themselves for them to know the right and avoid what is being avoided, with this, children are not merely confuse and aware of everything by the use of their primary educators.

   c) To the nursing students, to review and have understanding of the patient’s level of awareness and knowledge with regards to sexuality, their religious belief, attitudes and values and how they interpret reproductive health. Through this those nursing students will know how to assess person’s different beliefs and traditions regarding the said topic.

   Further investigation with the following specifications (1) Reproductive Health Education: A Factor in Preparation for Responsible Parenthood (2) Cultural Norms: As an Impact of Awareness and Wellness (3) Sexual Ethics: As an Aspect of Behavioral Response are recommended.

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