THE RISK TAKING BEHAVIOR AND LEVEL OF KNOWLEDGE ON SEXUAL AND REPRODUCTIVE HEALTH OF FIRST YEAR STUDENTS OF SEVEN UNIVERSITIES IN TURKEY

Prepared by
Bahar DOGAN, MSc, PhD, Assoc. Prof.
Hacettepe Univ. Faculty of Medicine, Dept. of Public Health
WHO Collaborating Centre on RH

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The 10-24 age groups are considered as “Young People” due to intersection of ages of adolescence and youth periods.

This period is the transition period from childhood to adulthood. There occur physical, physiological, social, cognitive and economic changes in this period of life (UN, 2000).

This is also the period when sexual behaviours are decided.

Adolescents have vulnerability to risk taking behaviour (WHO, 1998; ICC, 2003).

Young people are perceived as generally healthy, and are not in need of special health services.
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.

There is still no universally accepted understanding of what is sexually healthy for adolescents. However, there is an emerging awareness that reproductive health programs and services should reach out to adolescents in order to teach them how to protect themselves from unwanted situations and having a "healthy" reproductive and sexual life.
Facts which illuminate the importance of the topic in world and in Turkey:

- Eighty-five percent of the 1.2 billion adolescents (10-19 years) worldwide live in developing countries and comprise of over quarter of its population (UNFPA, 2003). Today’s generation of young people is the largest in history (UNFPA, 2005).

- Adolescent girls are particularly vulnerable to early pregnancy, sexual abuse, child marriage and other harmful practices. Every year, some 14 million adolescent girls give birth (UNFPA, 2005).

- 15 millions of adolescents experience pregnancy each year. Since most of these pregnancies are unwanted, young women tend to have induced abortions, whether legal or not. According to WHO projections, nearly half of the induced abortions occur under unsafe conditions.
Facts which illuminate the importance of the topic in world and in Turkey:

★ The incidence of STIs among adolescents is increasing. Today, each year, one in 20 adolescents suffers from an STI other than HIV/AIDS; half of new HIV cases are observed in the 15-24 age groups (WHO, 2001).

★ The majority of sexual contacts among adolescents are unprotected (WHO, 2001).
Facts which illuminate the importance of the topic in world and in Turkey:

★ The population of 10-19 age group is 20.7% and 20-24 age group is 9.8% of the general population in Turkey (DIE, 2003).

★ Eleven point nine percent of women aged 15-19 are currently married (TDHS, 2003).

★ Unmet need of FP services is higher among women aged 15-29 and women living in rural residences.
Facts which illuminate the importance of the topic in world and in Turkey:

- Across age groups, the lowest level of ever use of any family planning method is observed among women aged 15-19 (TDHS, 2003).

- The proportion of women in the age group of 20-24 with at least one induced abortion is 7.3% (Akin, 2002).

- Sexuality is seen as a taboo, especially among girls in Turkey.

- Several parents continue to hold traditional belief in regard to their relationship with adolescents and do not talk about sex with their children.
Facts which illuminate the importance of the topic in world and in Turkey:

- The tradition of silence continues for those going to school; adolescents are unable to acquire adequate information during their formal education.

- On the contrary of the traditional attitude, different patterns of attitudes and behaviors about pre-marital sex can be present especially among young people at universities in big cities.

- In most of the sociological studies related to other medical and/or health related issues done in Turkey, it was shown that there are various cultural differences between regions, even within the same region between provinces and settlements. These differences could probably reflect to all parts of daily life and affect the attitudes and behaviors of young people as well as their surroundings.
Facts which illuminate the importance of the topic in world and in Turkey:

- There is no comprehensive study of adolescents at the national level and it is still an under-investigated area in Turkey.

- The results of all limited number of studies on sexual/reproductive health of young people show that adolescents have insufficient knowledge about sexual/reproductive health and their main sources of information are friends, parents and mass-media. On the other hand, they are interested in having information and counseling and services on these issues (Vicdan, 1993; Bahar Ozvaris et al., 1995; Ozyurek, Nalbant, 1998; HUIPS, 1999; HUPHD, 2004; Bertan, Ozcebe, Dogan, et al., 2006).
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Although the other surveys conducted in different time periods on adolescent university students provide valuable information on sexual behaviour, contraceptive use and level of knowledge on these issues, they were not covered all the eastern universities in Turkey. There is a notable lack of research on these young people.

Only three out of ten eastern universities were involved in the other related studies mentioned above.

The proposed study will attempt to complete the lack of information from the rest seven universities.
Objectives

The overall goal:
Exploring the risk taking behaviour, and some knowledge and opinions of adolescents about reproductive and sexual health related issues.

Secondarily,
Comparison of the results of previous studies’ to see the regional differences.
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Short-term objectives are to determine:
- the information and opinions on adolescence, about their sexual and reproductive health,
- the behaviors posing risk for health,
- the source of information on reproductive and sexual health, and
- the opinions and expectations regarding reproductive and sexual health services
of the first year students of universities.

Long-term objective:
- to contribute the intervention programs which will be constructed to prevent the health of adolescents and help them to adopt the healthy lifestyle.
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METHODOLOGY

Design and Implementation

Type, place and time of study

Place → seven universities located at the eastern part of Turkey.
(in science and literature, education and medical faculties)

The proposed time → between May 2006 and June 2007.
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Universe and sample

Universe → first year students of the faculties (around 7000)

Sample size → will be calculated (the estimated figure is 2800).

\[ n = \frac{(t^2pq)}{(d^2(N-1) + t^2pq)} \]

- \( n = \) sample size
- \( t = \) table \( t \) value at \( \alpha =0.05 \) level (1.96)
- \( p = \) prevalence/proportion (0.5)
- \( q = 1-p \) (1-0.5)
- \( d = \) degree of precision (0.05)
- \( N = \) universe
The risk taking behavior and level of knowledge on sexual and reproductive health of first year students of seven universities in Turkey

Exclusion criteria:
- Being older than the target age group (more than 19 years)
- Not being a student of the above mentioned faculties and/or universities

Sample selection:
- Will be selected proportional to size according to the faculties stated above.
- The departments of the faculties -which the participant students will come- will be determined randomly.
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Variables of the survey

- Some socio-demographic characteristics related to the students and their families
- Some characteristics related to the lifestyles of the students
- Risk taking behaviours of the students
- Knowledge about reproductive and sexual health
- Expectations and some opinions about the reproductive and sexual health services
Survey instrument and pre-test

- A structured questionnaire will be developed by researcher and the central research team.

- The form will consist of 3 parts:
  a) questions about socio-demographic characteristics,
  b) knowledge and opinions on reproductive and sexual health,
  c) health related behaviours.

- Pre-test will be done on a total of 60 students of a university other than the study universities located near to the study region in order to prevent contamination and to ensure the similarity of the pre-test group.
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Pre-test univ.
Study univ.s
Study team

- **Central research team** from the Department of Public Health, Faculty of Medicine, University of Hacettepe.

- **Local research teams** the responsible residences of the Public Health Departments of the Medical Faculties in the seven universities.

1 day training meeting for responsible residences in Ankara. About the survey in general, data collection and the content of questionnaire.
Data collection

- Self-administered questionnaire; filled out under observation; in the classes.

- Organization of the data collection by the responsible residence.

  The deans of the study faculties will be informed.

  Then, the directors of the randomly selected departments of the faculties will be informed and requested to schedule the data collection dates.

Data collection
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Data Analysis

- Data management and analysis → SPSS or EPI-INFO.
- Univariate and bivariate analysis
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Informed Consent Procedures and Ethical Issues

- **Confidentiality** → storage of all forms and data in locked file cabinets
- **Anonymity** → not taking the names and school numbers of the students

All respondents will be read an informed consent form that explains the basic nature of the study and seeks the agreement of the respondent to be interviewed.

The consent form will explain the following:
- the purpose of the study
- how confidentiality will be maintained
- the right to refuse participation without jeopardizing their relationship with the institutions (school) or individuals affiliated with the research
- the right to refuse to answer particular questions and the right to discontinue participation at any time.

From all universities local ethical committees, the permission will be obtained.
In order to increase the likelihood that study results will be utilized, the research team will undertake the following steps:

1) identify the decision-makers most likely to be interested in the research and inform them of the study objectives;
2) involve stakeholders in as many aspects of the study as possible in order to increase their commitment to using the results;
3) produce a brief, clearly written report which focuses on the major findings with programmatic implications;
4) include a section on study implications;
5) conduct an end of study seminar which provides sufficient time for participants to discuss study results and develop an action plan.
### Timetable of the Study

<table>
<thead>
<tr>
<th>Activity</th>
<th>Proposed Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Literature review</td>
<td>May 06, Jun 06, Jul 06, Aug 06, Sep 06, Oct 06, Nov 06, Dec 06, Jan 07, Feb 07, Mar 07, Apr 07, May 07, Jun 07</td>
</tr>
<tr>
<td>Preparing the questionnaire</td>
<td>X X</td>
</tr>
<tr>
<td>First pre-test in Ankara</td>
<td></td>
</tr>
<tr>
<td>First revision of the questionnaire</td>
<td>X</td>
</tr>
<tr>
<td>Second pre-test of the questionnaire (in Gazi Osman Pasa Univ-Tokat)</td>
<td>X X X</td>
</tr>
<tr>
<td>Last revision of the questionnaire (if needed)</td>
<td></td>
</tr>
<tr>
<td>Obtaining the # of first year students from Students Affair Offices of universities</td>
<td>X</td>
</tr>
<tr>
<td>Calculation of the sample sizes and random selection of the study departments</td>
<td>X</td>
</tr>
<tr>
<td>Preparation of the training meeting in Ankara</td>
<td></td>
</tr>
<tr>
<td>Training meeting in Ankara</td>
<td>X</td>
</tr>
<tr>
<td>Printing and transporting the questionnaires to the survey sites</td>
<td>X</td>
</tr>
<tr>
<td>Preparation of data collection at the sites</td>
<td>X</td>
</tr>
<tr>
<td>Data collection</td>
<td>X X</td>
</tr>
<tr>
<td>Collection of the completed forms from sites</td>
<td>X X X</td>
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<tr>
<td>Preparation of coding guide and coding of the forms</td>
<td>X X X X</td>
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<tr>
<td>Data processing and editing</td>
<td>X X</td>
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<tr>
<td>Data analysis</td>
<td>X</td>
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<tr>
<td>Report writing</td>
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<tr>
<td>Dissemination of the results</td>
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BUDGET

<table>
<thead>
<tr>
<th>Budget summary</th>
<th>Total US $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel (1)</td>
<td>17,400</td>
</tr>
<tr>
<td>Supplies (2)</td>
<td>4,100</td>
</tr>
<tr>
<td>Travel and accommodation (3)</td>
<td>1,785</td>
</tr>
<tr>
<td>Other costs (4)</td>
<td>300</td>
</tr>
<tr>
<td><strong>GRAND TOTAL</strong></td>
<td><strong>23,585</strong></td>
</tr>
</tbody>
</table>

* The exchange rate used to convert local expenses into US $ is 1.3 YTL.
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THANK YOU.