AJEMATES
African Journal of Educational Management, Teaching and Entrepreneurship Studies
VOL.2, January-April, 2021 https://ajemates.org
ACADEMICJOURNALS
expand your knowledge
http://www.academicjournals.org

REPRODUCTIVE HEALTH NEEDS OF PRIMARY SCHOOL CHILDREN AND ASSOCIATED CHALLENGES: IMPLICATION FOR COUNSELLING

UBA MERCY BENEDETTE IFEOMA (Ph.D)
Department of Educational Foundational,
Alex-Ekwueme Federal University, Ndufu-Alike Ikwo,
Ebonyi State, Nigeria
Phone: +234-8034278834; E-mail: benedictifeoma@yahoo.com

Abstract
This study investigated Reproductive health needs of primary school children and associated challenges. It was a descriptive survey research guided by three research questions. The population of the study comprised all the public primary schools in the six education zone of Anambra State. Fifty primary schools were randomly selected from 10 Local Government Area of the state. That is five schools from each local Government Area were randomly selected. A total of two hundred and fifty primary school teachers were randomly selected i.e. 5 respondents from each school. The instrument for data collection was titled 'Reproductive Health Needs of Primary School Children and Associated Challenges (RHNPSCAC)'. Mean scores were used in answering the research questions. The findings from the study revealed among other things that access to information on reproductive health, age appropriate sexuality education, reproductive health needs of children. Moreover, factors like cultural norms like forced early marriage, female genital cutting and so on affect reproductive health needs of children. In the strength of the above, it was recommended that counsellors should be employed in all primary school so that they can provide age-appropriate reproductive health information to the children.

Keywords: Reproductive Health; Needs; Primary School; Children; Challenges; Implications; Counselling.

Introduction

Primary school period is one of the important periods of human life because it determines the future of the pupils to a large extent. Success of persons in this period not only forms a strong academic foundation but also secures their future and contributes significantly to national development. Reproductive health needs are among the most fundamental aspect of life. Yet, it often receives little or no attention in public policy discussion in Nigeria because of cultural, religious and political sensitivities.

In Nigeria, primary education begins at the age of six and last till the age of twelve for the majority of Nigerians. According to Kail and Cavanaugh (2010), girls begins puberty around ages 10-11 and complete puberty around 15-17. According to Anderson, Dallal and Must (2003) the major landmark of puberty for females is menarche, the females. The word, 'puberty' describes the physical changes to sexual maturation, not the psychosocial and cultural maturation denoted by the term adolescent development, which overlaps much of the body's period of puberty (The Oxford Dictionary of English Etymology, 1996).

Primary school children are often deprived of access to information and services for their reproductive health, partly due to religious and society belief and attitude regarding young people's sexual behaviour; and as such numerous threat including pregnancy, sexually transmitted diseases and so on at the onset of their adolescent stage (Senderwitz, 1996).

Reproductive health therefore refers to more than the reproductive organs and reproduction. The term, 'health organization' in the international conference on population and development in 1994 defined reproduction health as: 'A state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, all matters relating the reproductive system and to its function and process'.

Developmentally, most youths are already enrolled in secondary school during their adolescence hence they are in school when they begin to be sexually active. Hence by providing reproductive health needs early particularly before

their initiation of sexual activity, it is possible to encourage the formation of healthy reproductive health attitudes and practices instead of changing well established unhealthy habits. Moreover, when programs are provided in primary schools the potential to reach student before they start encountering reproductive health challenges is possible (Senderrowitz, 1996).

The reproductive health needs of the primary school children include: access to information on reproductive health, age peculiar sexuality education, informed knowledge of reproductive hygiene and other issues such as rights and laws. More so, provision of life skills which are positive behaviours are imperative since they enable individuals to adapt to and deal effectively with the demand and challenges of life.

Despite the numerous challenges associated with poor reproductive health services among primary school children like histories of abuse, sexual risk-taking behaviour, child pregnancy and sexually transmitted disease, parents are often unprepared or unwilling to provide information on reproductive health matters to those children or discuss sexual matters with them (Van berkel, 2009). In this context, it is imperative that school children have access to accurate, accessible and age appropriate information and education about their reproductive health. As such, reproductive health education should be part of not only primary and secondary school curriculum but of community groups and health centers (Reproductive Rights, 2003).

In Nigeria, child pregnancy related problems constitute a leading cause of death for young people aged 12 – 15 years. With complication from unsafe abortion and child birth representing the major contributing factor (Anyamene&Anyamena, 2009). This is because children lack reproductive health information which heightens their vulnerability (Peters, 2003). It is against this background that the researches set out to ascertain the reproductive health needs of primary school children and associated challenges.

Research Questions

The following research questions guided the study:

1. What are the reproductive health needs of primary school children?
2. What are the socio-economic and cultural barriers affecting the reproductive health needs of primary school children?
3. What could be done to promote and protect the reproductive health needs of primary school children?

Method

The study adopted a descriptive survey design. The population of the study comprised all the public primary schools in the six education zone of Anambra State namely Aguata, Ogidi, Awka, Onitsha Ihiala and Otuocha. As at 2016, there were 21 Local Government Area in the state. Data collected from Anambra State Universal Primary Education Board, Awka, (2016) revealed that the State has a total of 1,020 primary schools. Out of this population, 50 primary schools were randomly selected from 10 Local Government Area of the state. That is 5 schools from each local Government Area were randomly selected.

A total of 250 primary school teachers were randomly selected i.e. 5 respondents from each school. The instrument for data collection was titled 'Reproductive Health needs of Primary School children and Associated Challenges (RHNPSCAO)'. The instrument was subjected to face and content validity by two educational experts from the department of Guidance and Counselling and measurement and Evaluation of Nnamdi Azikiwe University, Awka. They pointed out corrections, and the researchers used these in adjusting the instrument accordingly. The reliability and interval consistency of the tests were established through pilot testing of the instrument on 20 teachers from public primary school in Enugu Education zone. Test retest method was employed. Pearson Product moment correlation coefficient was used and it yielded a value of 0.84. The weighted responses were structured in four point rating scale of strongly agree (4 point), agree (3 point), disagree (2 point), and strongly disagree (1 point). Any item with a mean score of 2.50 and above was regarded as agreed while a mean score of below 2.50 indicated disagreement of the respondent with the item.

AJEMATES

Results

Research Question 1

What are the reproductive health needs of primary school children?

Table 1: Mean responses on the reproductive health needs of primary school children.

S/N	ITEMS	4 SA	3 A	2 D	1 SD	X	X	DEC.
1.	Access to information reproductive health	159636	151453	76152	8484	4701325	2.82	agree
2.	Age appropriate sexuality education	202808	128414	89178	4141	4701441	3.07	Agree
3.	Knowledge of reproductive hygiene	3671068	98294	66132	3939	4701533	3.26	Agree
4.	Access to reproductive health care and services	111444	140420	138276	8181	4701221	2.60	Agree
5.	Knowledge of children's right as regards to reproductive health	159636	101303	126252	8484	4701275	2.71	Agree
	Grand mean							

The result in table 1 above, shows that all the mean scores presented in the table have mean scores above of 2.50 indicating that the respondents agreed that; access to information on reproductive health, age appropriate sexuality education, reproductive hygiene and knowledge of children's right as regards to reproductive health are the reproductive health needs of primary school children.

Research Question 2

What are the socio-economic and cultural barriers affecting the reproductive health needs of children?

Table 2: Mean responses on the socio- economic and cultural barriers affecting the reproductive health needs of children.

S/N	ITEMS	4 SA	3 A	2 D	1 SD	X	X	DEC.
1.	Female genital mutilation	201 804	98 294	150 300	21 21	470 1419	3.02	Agree
2.	Forced early marriage	202 808	88 264	139 278	41 41	470 1391	2.96	Agree
3.	Termination of education due to poverty	202 808	88 264	89 178	91 91	470 1341	2.85	Agree
4.	Broken homes	161 644	140 420	88 176	81 81	470 1321	2.81	Agree

The result in table 2 above shows that the grand mean for the items was 2.91 showing a positive response to the statement. The mean score is greater than the criterion mean 2.50. This showed that termination of education due to poverty, broken homes, cultural norms and values like female genital cutting and forced early marriage are factors affecting reproductive health needs of children.

This is in line with the findings of Okont (2007), that cultural norms and values, female genital mutilation, early marriage and parental socio-economic background as determinants of reproductive health of young adolescent in Niger Delta.

Research Question 3

What can be done to promote and protect reproductive health needs of primary school children?

Table 3: Many responses on what can be done to promote and protect reproductive health needs of primary school children

S/N	ITEMS	4 SA	3 A	2 D	1 SD	X	X	DEC.
1.	Stepping up the fight against Female genital mutilation	150 600	170 510	81 162	70 70	470 1342	2.86	Agree
2.	Providing appropriate Reproductive health services	103 412	201 603	124 248	42 42	470 1305	2.78	Agree
3.	Preventing early pregnancy	205 820	170 510	57 114	38 38	470 1482	3.15	Agree
4.	Age appropriate sexuality education	107 428	164 492	102 204	97 97	470 1285	2.73	Agree
5.	Provision of counselors in all primary schools	158 632	129 387	83 166	100 100	470 1285	2.73	Agree
6.	Teaching the children how to make use of contraceptives and condoms	0 0	12 36	200 400	258 258	470 694	1.48	Disagree
	Grand mean						2.6	

Table 3 showed that the grand mean score for the items was 2.6 and this is greater than the criterion mean of 2.50. This data revealed a positive response to the statement that providing information,

age appropriate sexuality education and support; prevent early
Pregnancy; stepping up to fight against female genital mutilation and providing appropriate reproductive health services are what need to be done to promote and protect reproductive health needs of primary school children. This is in line with the findings of Dehne and Riedner (2005) and Adesioye (1996) that advocated the use of these strategies in promoting reproductive health education among people.

Discussion of Result

The findings from research question one revealed that the respondents agreed that; access to information on reproductive health, age appropriate sexually education, reproductive hygiene and knowledge of children's right as regards to reproductive health are the reproductive health needs of primary school children. This is in support of VanBerkel (2009) that it is imperative that school children have access to accurate, accessible and age appropriate information and education about their reproductive health. As such, reproductive health education should be part of no only primary and secondary school curriculum but of community groups and health centres (Reproductive Right, 2003). Also Peter (2003) affirmed the finding because many children lack reproductive health information which heightens their vulnerability.

Again research question two revealed that termination of education due to poverty, broken homes, cultural norms and values like female genital cutting and forced early marriage are factors affecting reproductive health needs of children. This is in line with the findings of Okonta (2007), that cultural norms and values, female genital mutilation, early marriage and parental socio – economic background as determinants of reproductive health of young adolescents in Niger Delta.

The data in research question three revealed a positive responses to the statement that providing information, age appropriate sexuality education and support; preventing early pregnancy; stepping up to fight against female genital mutilation and providing appropriate reproductive health services are what need to be done to promote and protect reproductive health needs of

primary school children. This is in line with the findings of Dehne and Riedner (2005) and Adesioye (1996) that advocated the use of these strategies in promoting reproductive health education among people.

Counselling Implications/ Recommendations

1. Counsellors should endeavour to enhance counselling services by organizing parents forum where parents will be sensitized on the need to show interest on the reproductive health need of their children.
2. There is need for counsellors through talk-shows imbibe in the children knowledge and skills that will equip them to live a responsible life style now and in the future.
3. Counsellors should collaborate with teachers to support the development of school curricular that gives school children age appropriate comprehensive reproductive health education.

Conclusion

The findings of this study have revealed that there is need for young people to have accurate information and counselling on their reproductive health. The study equally shows that there is an urgent need for parents, educators, health care providers, programme planners and policy makers to address the reproductive health needs of primary school children . It therefore, become imperative that there should be programmes for the education and counselling of young children in the areas of gender relations and equality, responsible sexual behaviour , reproductive health and sexual transmitted diseases.

References

Adesioye, D. (1996). Need for sexuality education for youth Sept 24 Daily.Time pp9

Anderson, S. E.; Daiial, G. E.; & Must, A. (2003). Relative weight andrace Influence averageage at menarche: result from two nationality representatives survey of US girls studied 25 years apart. Pediatrics, 111(4 pt 1), 844-850.

Anyamene, A.; & Anyamene, C. (2009). Determinants of Adolescents Reproductive Health Problemsin Awka South Local Government

Area South East Nigeria: Implication for Counselling. *An International Multi –Disciplinary Journal, 3 (1)*, 61-67.

Dehne, K. L.; &Riedner, G.(2005). Sexuality Transmitted Infection Among adolescents: the need for adequate health services. Geneva: World Health Organization.

Kail, R. V.; Cavanaugh, J. C. (2010). Human Development: a lifespan View (5thed.). Belmot, CA: Wadsworth, Cengage Learning.

Okonta, P. (2007). Adolescent sexual andreproductive health in the Niger Region of Nigeria - issues and challenges. *African Journal of Reproductive Health, 11(1)*, 113–124.

Peters, T. R. (2003). Promoting Sex education and Correction Unwanted pregnancies. *Journal of health Education, 3(2)*, 890-103.

Reproductive Rights (2003). "Sexual reproductive Health Education and services for Adolescents"; Retrieved from:www.reproductiveright.org Accessed June 1, 2016.

Senderowitz, J. (1996). "Reproductive Health Program for young Adult: school-based programs: Available athttp://www.fhi.org/ accessed June 7 2016.

Van Baerkel, C. (2009). Education for Health: Towards Improving the Reproductive health status of young in Magu, Tanzania. (UnpublishedDoctoral Dissertation) Utrecht University Tanzania.

World Health Organization (2006). Implementing the global Reproductive health strategy Geneva: WHO.

World Health Organization (1994). Available at http://whoint/topics/reproductive health/en/. Accessed June 12, 2016.