

Reproductive health awareness among Al-Qadisiyah medical students

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الخلاصة

أجريت دراسة مقطعية من كانون الأول 2015 إلى آذار 2016 لمعرفة مستوى الوعي لدى طلاب كلية طب القادسية حول الصحة الإنجابية . .

أهداف الدراسة :

1. تهدف الدراسة للتعرف على مواقف واتجاهات طلبة كلية طب القادسية في مواضيع الصحة الإنجابية وتنظيم الأسرة .

2. التعرف على العوامل الاجتماعية والديموغرافية للطلبة المساهمة في الصحة الجنسية والإنجابية وتنظيم الأسرة .

المنهجية :

أخذت عينة عشوائية من 387 طالب وطالبة من كافة مراحل الكلية (من الأول إلى السادس)..وقد تم تصميم استبيان لمعرفة مواقف ومفاهيم الطلبة حول الصحة الإنجابية .

كان معدل اعمار غالبية عينة الدراسة (50%) اقل من 21 سنة , وحوالي 78% منهم كانوا اناثا , كذلك كان 78% منهم غير متزوجين .

وقد تم تصميم استبيان لمعرفة مواقف ومفاهيم طلبة كلية طب القادسية حول الصحة الإنجابية , وكانت النسخة النهائية للاستبيان مكونة من اثني عشر جزءا رئيسيا ..الجزء الاول بشأن الخصائص والديموغرافية في حين ان الجزء الثاني يحتوي على اسئلة عن العمر المثالي للزواج والحمل , والثالث يحتوي اسئلة عن معرفة الطالب حول الصحة الإنجابية وتنظيم الأسرة ... واجزاء اخرى فيها أسئلة تتعلق بوعي الطلبة عن العقم واسبابه , واخرى عن الاجهاض , وغيرها عن الامراض المنقولة جنسيا وطرق انتقالها وعلاقتها بالعقم والصحة الإنجابية بصورة عامة .

النتائج:

اظهرت الدراسة ان 86% من الطلبة قيد الدراسة كان لديه وعي فيما يخص السن المناسب للزواج , 80% يقولون ان السن المثالية للحمل هو (18-34) سنة , 98.4% كانت لديهم فكرة جيدة جدا عن اهمية الفحوصات قبل الزواج , واغلب العينة كانوا يعلمون اهمية توافق فصائل دم المقبلين على الزواج ..50% منهم لايعرفون كيفية انتقال بغض الامراض بين المتزوجين , حوالي 24.4% يعتقدون ان الامراض الجنسية يمكن ان تسبب العقم , كذلك فان مايقرب من 56% يعتقدون ان استخدام وسائل منع الحمل لفترة يمكنها ان تسبب منع الحمل مستقبلا .

الاستنتاجات :

- 1- ان مستوى وعي الطلبة كان جيدا بشأن سن الزواج والحمل وكذلك عن اهمية الفحوصات قبل الزواج .
2. هناك خمسون بالمائة من الطلبة لا يعرفون الأمراض التي تنتقل عن طريق الاتصال الجنسي .
- 3.أكثر من نصف الطلبة 56.6% يعتقدون ان استخدام وسائل منع الحمل لفترة قد يسبب العقم مستقبلا .

التوصيات :

وبناء على هذه النتائج , توصي الدراسة بضرورة اجراء المزيد من الدراسات وعلى مستوى اوسع , وايجاد برامج بالتنسيق مع وزارة الصحة عن طريق مراكز الرعاية الصحية الأولية , من اجل توفير معلومات كافية في مجال الصحة الإنجابية , ولكافة الشرائح .

Abstract

Background:

Regenerative wellbeing focused on Millennium Development Goals won't be accomplished without enhancing information and mindfulness and access to conceptive wellbeing. Most of the youngsters have almost no information on what sexual rights they are qualified for. This review was expected to survey learning of regenerative and sexual rights and in addition related elements among Al-Qadisia medicinal understudies.

Objectives:

1-To evaluate the consciousness of regenerative wellbeing among Al-Qadisia medicinal undergraduate medical students.

2-To distinguish the socio-statistic variables adding to sexual and regenerative wellbeing and family arranging.

Material and Methods

A cross sectional review was directed from December 2015 up to the March 2016 with a specific end goal to know familiarity with Al-Qadisia restorative understudies about the regenerative wellbeing.

A disproportional strata randomization sample of (387) students was taken from the six departments of the college.

Questionnaire was designed to measure the phenomena " knowledge and awareness of students in college of medicine about the reproductive health" the final copy of the questionnaire consists of twelve main parts, the first part concerning of demographic characteristics, while the second part of the checklist contain age of marriage and conception ,the third part contain knowledge about reproductive health and family planning ,and other parts contain awareness regarding factors related to infertility, knowledge about abortion and reproductive health, knowledge about route of transmission of STIs, etc

Results

The vast majority of the study sample (50%) with age ranging (<21) years ,about (78%) were female, (98%) of students were single , on other hand the level of 'awareness' was (86%) regarding age of marriage and (80%) regarding conception , also about the importance of the premarital investigations, the most important investigation they know was ABO compatibility.

Regarding sexual transmitted diseases about fifty percent know and other fifty percent they didn't know the transmission of some disease between couples through sexual contact., one quarter nominated AIDS as the disease that could be transmitted sexually and about two thirds they don't know any other diseases, 42.4% they believed that STDs could cause infertility and 52.7% they don't know about that. More than half (56.6%) believed that contraceptive uses cause infertility.

Conclusions and Recommendations:

The study found that the level of 'awareness' was 'good' regarding age of marriage and conception , also about the importance of the premarital investigations, the most important investigation they know was ABO compatibility. fifty percent know and other fifty percent they didn't know sexual transmitted disease, more than half believed that contraceptive cause infertility .

Based on the finding of this study the researcher recommended further studies should be conducted with a wide range sample and hold Programs that provide information about the reproductive health awareness.

Introduction

Conceptive and sexual rights were first authoritatively perceived at the International Conference on Population and Development (ICPD) in Cairo in 1994(1)

Activity for general access to sexual and conceptive wellbeing (SRH) by 2015 was concurred by 179 nations; in spite of this global responsibility, advance towards the program has been moderate [2].

Along these lines, this review set out to evaluate the level of understudies' learning about conceptive and sexual

wellbeing and in this manner create fitting proposals and mediation systems to enhance regenerative wellbeing mindfulness . [4].

Objectives:

- 1-To survey the consciousness of regenerative wellbeing among understudies examining in Al-Qadisia restorative school. .
- 2-To distinguish the socio-statistic elements adding to sexual and regenerative wellbeing and family arranging.

Review of literature

The view of conceptive wellbeing emerged in the 1980s with a developing development far from populace control and statistic focuses towards a more all encompassing way to deal with ladies' wellbeing . It was not until the ICPD in 1994 and the Fourth World Conference on Women (FWCW) in 1995 that the idea increased global acknowledgment and was proclaimed as a defining moment for ladies' wellbeing. [5]

The ICDP conveyed to worldwide acknowledgment two imperative directing standards of RSH: that enabling ladies and enhancing their status are critical closures in themselves and basic for accomplishing feasible improvement; and regenerative rights are inseparable from essential human rights, as opposed to something having a place with the domain of family arranging. The FWCW reaffirmed and fortified the accord that had risen at the ICPD[6].

The ICPD gathering was instrumental in formalizing the paradigmatic move in how ladies' wellbeing was conceptualized and how administrations were conveyed. The route in which conceptive wellbeing was seen started to change: the concentration turned into the advancement of solid regenerative lives, as opposed to the aversion of sexual grimness.

Not exclusively were there changes in the sorts of projects that were conveyed, additionally in the planned beneficiaries and way of conveyance of projects. For instance, men were perceived as having a critical part to play; kid survival was accentuated; the coordination of RSH administrations into essential social insurance as opposed to their being offered as a different administration in isolated offices was pushed; and the requirement for regenerative wellbeing administrations particularly intended for exiles and inside uprooted people (IDPs) was perceived. Generally speaking, it required an essential reevaluate of wellbeing administration provision.[7]

Family arranging:

Family arranging (FA) administrations are important both to people not needing a pregnancy and to the individuals who crave pregnancy, however need to guarantee sufficient dispersing. There is no decisive confirmation to indicate whether fruitfulness rates increment or decline amid removal (8, 9 ,10).

There have been contentions for both, yet the most persuading is that fruitfulness rates look like those of pre-relocation settings in steady or longer-term outcast/uprooted conditions (McGinn 2000) [8].

Notwithstanding, it is basic that vagrant populaces are given access to contraception, and as circumstances balance out, that they are given viable, safe, and socially suitable strategies for family arranging. (9).

The most essential type of FA ought to be condoms, to help with family arranging choices, as well as to ensure against STIs and HIV/AIDS. Sex touchy writing computer programs is fundamental to address the flow of learning force, and basic leadership in sexual connections, between specialist organizations and customers, and between group pioneers and subjects.

Men must be perceived as having regenerative wellbeing needs together with the way that the association of men is a fundamental piece of ensuring ladies' conceptive wellbeing. The other related issue that may increment in precarious vagrant settings and must be focused on is risky premature births. They are a result of undesirable pregnancies (frequently the consequence of sexual viciousness, particularly in struggle situations).[9]

There are an expected 20 million hazardous premature births every year, and 19 million of these happen in creating nations, of which many don't lawfully permit fetus removal for assault cases. Around 33% of ladies experiencing perilous premature births encounter genuine difficulties , and roughly one in eight ladies who pass on every year from pregnancy-related causes do as such because of fetus removal complexities (The Alan Guttmacher Institute 1999)[10].

For adolescence changes and comparative matters, the standard wellsprings of data are guardians and instructors. For sexual connections, be that as it may, the primary sources are companions and associates. There is little data on sexual advancement, and what is accessible is constrained to menarche for young ladies and wet dreams for young men. Data on sexual conduct including dating conduct, demonstrates that youngsters are included in different sorts of particular sexual conduct, including some viewed as unsuitable as indicated by religious and social norms. [12]

It is empowering that the time of first pregnancy has expanded and that the premature birth, which is unlawful, was greatly hard to discover, and the circumstance must be evaluated from recounted and media reports. The 20-29 year-seniority bunch adds to a high extent of instances of STI, particularly HIV/AIDS. In 2001 that age gather represented 27.7% of cases, and in 2002, 30.4%. [13]

Intravenous medication use among youngsters remains the most difficult part of HIV transmission in Malaysia. The occurrence rate among infusing drug clients is around 25%-27%. There gives off an impression of being variable levels of information, however more critically, notwithstanding when there is learning, it is not converted into solid conduct. Young individuals, particularly young ladies, are at danger of sexual brutality, and a vast extent of announced assaults are executed against young ladies underneath 16 years old. In around 75% of revealed cases, the attacker is somebody known to the casualty, and 13% are casualties of interbreeding. [14]

There are additionally reports of youths and youngsters being the culprits of sexual violations. In around 7% of cases, the attacker is an understudy. Number of juvenile pregnancies has diminished over late years. Maternal passings are along these lines moderately uncommon in the pre-adult age assemble. Data on premature birth, which is illicit, was to a great degree hard to discover, and the circumstance must be surveyed from

episodic a media reports. The 20-29 year-maturity bunch adds to a high extent of instances of STI, particularly HIV/AIDS. In 2001, that age amass represented 27.7% of cases, and in 2002, 30.4%. Intravenous medication use among youngsters remains the most difficult part of HIV transmission in Malaysia. The rate among infusing drug clients is around 25%-27%. [15]

There gives off an impression of being variable levels of learning, however more significantly, notwithstanding when there is information, it is not converted into sound conduct. Youngsters, particularly young ladies, are at danger of sexual brutality, and a vast extent of detailed assaults are executed against young ladies beneath 16 years old. In around seventy five percent of detailed cases, the attacker is somebody known to the casualty, and 13% are casualties of interbreeding. There are additionally reports of youths and youngsters being the culprits of sexual wrongdoings. In around 7% of cases, the attacker is an understudy. A Study of Awareness of Reproductive Health among College Students of Visakhapatnam in 2015 [16].

With respect to, condoms and female sanitization were known to a large portion of them. The majority of the young ladies thought about H.I.V disease and they had this learning through TV. Their insight into indications and avoidance of Sexually transmitted maladies and malignancy screening was restricted. The vast majority of them felt the requirement for sex instruction. Albeit 66% of the review gathering knew about financial components; drain and troublesome conveyance bringing about maternal mortality, none knew about sepsis and hypertension creating maternal deaths. [17]

A review in Nigeria in 2008 The outcomes uncovered that while the understudies showed reasonable learning of human science, they needed information of self-defensive instruments as it identified with sexual wellbeing. Around (half) of the members detailed that they have engaged in sexual relations, at the period of under 11

years when they more likely than not been in the grade school and most (89.3%) at age 11-14 years. Half (50.9%) of the respondents believe that a young lady would not get pregnant in her first sexual experience. Factually a greater amount of the individuals who have ever had intercourse were sold out this obliviousness ($p=0.004$). The young men were less sure about what constitutes the wrong thoughts regarding regenerative wellbeing frameworks than the young ladies ($p=0.042$). In a similar vein, there was a distinction ($p<0.0001$) in the extent of the provincial occupants, versus their urban partners that could effectively distinguish the wrong thoughts regarding human reproduction.[18]

Methodology :

An organization based cross-sectional study was directed. The quantity of understudies tested from the school was 500 which spoke to aggregate number of understudies. Enlightening measurements was utilized to portray the review populace in connection to pertinent factors.

The review members filled the survey in the meantime in 8 address corridors, each with 50 seats. Information quality was controlled via trainings and close supervision.

Study design and setting :

This review utilized an elucidating, cross-sectional review outline. The setting was the principle grounds at the Al – Qadisia therapeutic school in Diwaniya area.

Sample size

The review populace comprised of all the enrolled, college understudies going from the first to the 6th years at the Qadisia therapeutic school.

Inclusion and exclusion criterion:

The aggregate selected understudies in the review was 387 which speak to 76.8% . Roughly 22% of the understudies' were guys and 78% were females.

Ethical considerations

The respondents were all the enlisted, college understudies from all times of learn at the Qadisia therapeutic school. Both males

and females, wedded and single were partaken and incorporated into the review.

Moral contemplations :

Moral endorsement for the review was acquired from the deanship of the school, then a formal letter of participation was composed to Al-Qadisia University. Verbal assent was acquired from each review member.

Classification of the respondents was kept up at all circumstances and the cooperation was willful , 13 understudies was not react to the review.

The instrument :

The survey had twelve segments. The main area comprised of statistic data, for example, age, sex, year of study, and so on while the second some portion of the agenda contain time of marriage and origination ,the third part contain information about conceptive wellbeing and family arranging ,and different parts contain mindfulness with respect toe wellbeing, learning about course of transmission of STIs, and so on

Information gathering:

Straightforward arbitrary testing technique was utilized to choose tests for the review. The understudies were selected from key focuses and regions utilized by the understudies inside the college group.

The vital focuses chose were the outlet of the instructing corridors. A self-directed survey was utilized to gather the information and was conveyed for them. The polls were in Arabic.

Pre-testing of the survey was directed to distinguish holes and adjust the poll.

Information examination :

Information were gone into a Microsoft Excel 2010 spreadsheet and examined, utilizing the SPSS 12 . The socioeconomics and result factors were abridged utilizing illustrative rundown measures, communicated as means (SD) for persistent factors and rate for absolute factors. Chi-square test was utilized to decide the trial of relationship between the clear cut factors.

All the measurable tests were performed utilizing two-sided tests at the .05 level of importance. P-values answered to three decimal spots with qualities under .001 detailed as <.001. P-values under .05 were considered factually critical.

Results

Table 1. Demographic information of the students (n 5 387).

		No.	%
Gender	Male	85	22
	Female	302	78
Marital status	Married	8	2
	Unmarried(single)	379	98
Residence	Urban	327	84.5
	Rural	60	15.5
Age groups	<21	194	50.1
	21-24	179	46.3
	>24	14	3.6
Economic status	Adequate	249	64.3
	Acceptable	122	31.5
	Inadequate	16	4.1
level of Father education	Intermediate and below	163	42.1
	Secondary school	90	23.3
	University level	134	34.6
level of mother education	Intermediate and below	249	64.4
	Secondary school	69	17.8
	University level	69	17.8

This table shows that the vast majority of the study sample (50.1%) with age (<21) years , about (78%) were females ,(77.8%) of students were single.

Table (2) Age of marriage and conception

Suitable age for marriage		<18	18-34	>34
	No.	41	333	13
	%	10.6	86	3.4
Suitable age for conception	No.	74	307	5
	%	19.3	79.4	1.3

This table shows that the vast majority (86%) of students believes that the Suitable age for marriage is (18-34), and (79.4%) and the Suitable age for conception are (18-34)

Table 3 Knowledge about Reproductive health and family planning

		No.	%
Family planning should be incorporated within university curriculum	Yes	240	62
	No	44	11.4
	Do not know	103	26.6
Family planning and religious	Yes	57	14.7
	No	212	54.8

prohibition	Do not know	118	30.5
Raising of reproductive health issues is rejected by social traditions and norms	Yes	129	33.3
	No	121	31.3
	Do not know	137	35.4

This table shows (62%) of students answers "Yes" that Family planning should be incorporated within university curriculum , and (%54.8%) answers "No" that Family planning and religious prohibition , (35%) of students answers "Do not know" about raising of reproductive health issues is rejected by social traditions and norms.

Table 4 Awareness regarding family planning and reproductive health

		Freq.	%
Best suitable period between pregnancies	One year	64	16.5
	Two years	229	59.2
	Do n't know	94	24.3
There are difference between family planning and contraception	Yes	292	75.5
	No	32	8.3
	Do n't know	63	16.3
Family planning is the way for selection desired No. of kids	Yes	258	66.7
	No	77	19.9
	Do n't know	52	13.4
Family planning is the right of the parents	Yes	313	80.9
	No	28	7.2
	Do n't know	46	11.9
Consanguinity marriage	Yes	242	62.5
	No	70	18.1
	Do n't know	75	19.4

This table shows (59.2%) answers (Two years) is the best suitable period between pregnancies , and (75.5%) differential between family planning and contraception , (66.7%) answers "Yes" about Family planning is the way for selection desired No. of kids , (62.5%) answers "Yes" about Consanguinity marriage .

Table 5 Awareness regarding Factors related to Infertility

		Freq.	%
STDs	Yes	164	42.4
	No	19	4.9
	Do n't know	204	52.7
Anemia	Yes	227	58.7
	Do n't know	160	41.3
Domestic animals	Yes	269	69.5
	No	11	2.8
	Do n't know	107	27.6

This table shows half of students "Don't know" STDs , and (58.7%) know Anemia related to Infertility ,about "tow third" know Domestic animals related to Infertility.

Table 6 Students' source of information and access point concerning contraceptives means and types

		No.	%
There are contraceptives means	Yes	238	61.5
	No	23	5.9
	Do n't know	126	32.6
Knowledge about types of contraceptives	Contraceptive pills	119	30.7
	IUCD	10	2.6
	Injections	12	3.1
	other	2	0.6
	More than one option	92	23.8
	Do n't know	152	39.3
Source of Knowledge	Family	230	59.4
	School	27	7
	Education	5	1.3
	awareness meetings		
	Media	3	0.8
	More than one answer	81	20.9
	Do n't know	41	10.6

This table shows (61%) of students know the contraceptives means ,but (40%) "Don't know" the types of contraceptives , (59.4%) answers the family is the source of Knowledge .

Table 7 Knowledge about Abortion and reproductive health

		Freq.	%
Abortion risk on the mother life	Yes	335	86.6
	No	37	9.6
	Do n't know	15	3.9
woman's right in abortion	Yes	98	25.3
	No	191	49.4
	Do n't know	98	25.3

This table shows (86.6%) of students know the abortion risk on the mother life , and about half of students believes the woman's right in abortion .

Table 8 Knowledge about premarital Investigation

	They Know		They Do not know		Total	
	No.	%	No.	%	Freq.	%
Importance of premarital investigation	381	98.4	6	1.6	387	100
Types of investigations	315	81.4	72	18.6	387	100
Knowledge about recommended types of premarital investigation	Freq.				%	
ABO compatibility	249				64.3	
AIDS	5				1.3	
Genetic disease	1				0.3	

More than one answer	60	15.5
Do nt know	72	18.6
Total	387	100

This table shows (98.4%) of students know the importance of premarital investigation ,but **about" tow third"** know the ABO compatibility only .

Table 9 Knowledge about route of transmission of STIs

	Yes	Do nt know	Total
Yes there is	189	48.8	51.2
No there is n't	17	4.4	63.3
Do not know	181	46.8	
Total	387	100	

This table shows half of students" Do not know" the route of transmission of STIs

Table 10 Knowledge about types of sexual transmitted diseases

	Freq.	%
Do not know	245	63.3
AIDS	100	30.8
Hepatitis	3	8
More than one answer	39	5.1
Total	387	100

This table shows (63.3%) of students " Do not know" the types of sexual transmitted diseases ,and about tow third know AIDS only .

Table 11 Awareness about relation of contraceptive to infertility

There is relation	219	56.6
There is no relation	33	8.5
I don't know	135	34.9
Total	389	100

This table shows (56.6%) of students believes there is relation of contraceptive to infertility

Table 12 Knowledge Mother Immunization.

are there vaccine should be given to the mother	Yes	291	75.2
	No	48	12.4
	Do not Know	48	12.4
Type of vaccine	Tetanus Toxioid	131	33.9
	Do not know type of vaccine	256	66.1

This table shows **more two third** of students **know the** vaccine should be given to the mother , but about **tow third** of them " Do not know" the type of vaccine .

Discussion:

Our information recognize learning crevices and misinterpretations encompassing regenerative wellbeing in a gathering of therapeutic understudies and adds to existing proof with respect to absence of fruitfulness mindfulness among college understudies

Table (2) shows that the vast majority (86%) of students believes that the Suitable age for marriage is (18-34), and (79.4%) and the Suitable age for conception are (18-34). These findings are the same which were found by Bunting L, et al [18].

Participants demonstrated awareness regarding family planning but were less able to identify that Family planning should be incorporated within university curriculum or there is any religious prohibition , table (3) shows (62%) of students answers "Yes" that Family planning should be incorporated within university curriculum , and (%54.8%) answers "No" that Family planning and religious prohibition , (35%) of students answers "Do not know" about raising of reproductive health issues is rejected by social traditions and norms.

As previously suggested [18,19] and in concordance with our results, in an era characterized by an increased use of electronic media, medical websites have been recognized as the main source of information regarding reproductive health issues.

Awareness regarding family planning and reproductive health table (4)shows that (59.2%) of our sample answers (Two years) is the best suitable period between pregnancies , and (75.5%) differential between family planning and contraception , (66.7%) answers "Yes" about Family planning is the way for selection desired No. of kids , (62.5%) answers "Yes" about Consanguinity marriage .

Interestingly, this agree with (.Bunting L, Boivin J (2008)), who find the importance of this not only for the young generation, but also for the general population who seeks Internet-based health information [18]

It has been demonstrated that when patients are better informed they can interact

more effectively with healthcare providers and take actions that benefit their health.

About source of information and access point concerning contraceptives means and types table (6) table shows (61.5%) of students know the contraceptives means ,but (38.5%) "Don't know" the types of contraceptives , (59.4%) answers the family is the source of Knowledge . (Lundsberg LS.) gave the same results in their study in 2011.[20].

About Abortion and reproductive health , table (7) shows (86.6%) of students know the abortion risk on the mother life , and about half of students believes the woman's right in abortion.

About (98.4%) of students know the importance of premarital investigation ,but about " tow third" know the ABO compatibility only , as shown by table (8) , and this agree with Hammarberg K, et al. findings [18].

About route of transmission of sexual transmitted diseases and their types table (9) shows half of students " Do not know" the route of transmission of STIs , and table (10) shows (63.3%) of students " Do not know" the types of sexual transmitted diseases ,and about tow third know AIDS only . This concur with a review done by the American College of Obstetricians and Gynecologists which has emphasized the significance of women's knowledge and attitudes towards reproductive health before planning for a pregnancy [20].

Table (10) shows that (56.6%) of students believe that there is relation of contraceptive use to infertility which is less than the impressive 97% of the Swedish students [20]

According to mother Immunization and its relation to infertility, table (12) shows more two third of students know the vaccine should be given to the mother , but about tow third of them " Do not know" the type of vaccine . Our findings are similar with previous research achieved by Bunting L, et al. 2008 [17] and highlight the need for increased awareness about vaccination since women's age at first birth has increased

dramatically worldwide over the past decades.

Impediments of study:

There were various impediments that could emerge from the review approach. The review populace comprised of understudies at one workforce, and it won't not be prudent to sum up our outcomes as to different colleges. Understudies' practices were self-detailed.

In spite of the fact that the reviews were mysterious, there may be data inclination since a few understudies may have been hesitant to report delicate data with respect to prophylactic practices. To limit this kind of predisposition, classification was guaranteed and different reviews are suggested.

Conclusions:

The level of 'awareness' is classified to "good", "bad", or "intermediate", in this study we found that the level of 'awareness' was 'good' regarding age of marriage and conception, also about the importance of the premarital investigations, the most important investigation they know was ABO compatibility.

Regarding sexual transmitted diseases about fifty percent know and other fifty percent they didn't know the transmission of some disease between couples through sexual contact., one quarter nominated AIDS as the disease that could be transmitted sexually and about two thirds they do n't know any other diseases, 42.4% they believed that STDs could cause infertility and 52.7 they don't know about that. More than half (56.6%) believed that contraceptive uses cause infertility.

Recommendations:

In view of the finding of this review it can be suggested that:

- 1) Further studies should be conducted with a wide range sample .
- 2) It is important to establish "national project" that encourage of reproductive health awareness.
- 3) Effective programs in the school and community programs and mass media campaigns that improvement of reproductive health awareness.

4) Screening of sexual transmitted disease should be conducted and training about syndrome management is highly advice .

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