94 - SEXUAL HEALTH FROM THE PERSPECTIVE OF ADOLESCENT SCHOOL PUPILS

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INTRODUCTION

According to the Ministry of Health, in today's Western culture, there is a consensus that the first signs of sexual maturity, initiated by the onset of puberty, definitively mark the beginning of adolescence. As such, puberty is part of adolescence, characterized mainly by the acceleration and deceleration of physical growth, changes in body composition, hormonal outbursts, and the development of sexual maturation. Puberty is a universal parameter, occurring in a similar form in all individuals; adolescence, meanwhile, is a singular phenomenon characterized by sociocultural influences that are concretized through constant reshaping of a social, sexual and gender-related, ideological and vocational nature. (BRASIL, 2005).

Adolescence can also be characterized as a period in which there are greater opportunities for adolescents to have new and attractive experiences. This makes them more vulnerable to presenting behaviors that place their health at risk. The most frequent risk behaviors among young people are related to early onset of sexuality, sexual intercourse without using condoms, failure to use, or inadequate use of contraceptives, misuse of drugs, alcohol and tobacco, violence, and traffic accidents. (TRINDADE; ANDRADE, 2003).

Corrêa; Jannuzzi; Alves (2003) defines sexual health as a field of knowledge that is directly involved with human reproduction, sexual behavior, methods of contraception, and Sexually Transmitted Infections (STIs). In this respect, the World Health Organization states that man has reproductive rights, involving the right to make decisions about reproduction, free of discrimination, coercion and violence. Alencar et al (2008) mention that when it comes to health and education of the adolescent, sexuality, family and school should be seen from a perspective of the principle of "non-exclusion", i.e. a system that must interact among its components, through linking, union, and respect for differences.

Considering the vulnerability of this age group, and the growing rate of teenage pregnancies and adolescents with STIs, this research has the following objectives: to identify knowledge of sexual health among adolescent students of a public secondary school; to identify the contraceptive methods used; to assess the adolescent's level of satisfaction concerning the role of the school in sex education.

METHOD

A quantitative Study, using exploratory and descriptive methods, was carried out in a public high school in the Brazilian municipality of Cajazeiras/PB. The determining factor for the choice of location was the high number of adolescents enrolled in Middle School in the 2013 academic year. The study population was comprised of 200 adolescents; the sample included 60 students distributed across three grades of middle school, who met the pre-established inclusion criteria. Adolescents aged under 18 only took part in this study with the permission of a legal guardian, through the signing of the Free and Informed Consent Form. The data collected were scanned, grouped by category, analyzed by simple statistics, and organized in tables using Microsoft Word software. They were then analyzed and discussed in light of the literature relating to the topic. The study followed the ethical guidelines of resolution 196/96 of the National Health Council, which deals with research involving human beings (BRAZIL, 1996), the project was approved by the Research Ethics Committee of the Faculdade Santa Maria, under protocol no. 430022010.

RESULTS AND DISCUSSIONS

The results show that the sample was comprised of 60 adolescents aged between 13 and 19 years, with 46% of respondents being in the 17 to 18 year age group. In terms of gender, there was a predominance of females with 77%; in relation to civil status, 96% were unmarried; in the item level of education, it was observed that 50% of the participants are still in 1st grade of Middle School, a fact that was somewhat worrying, given the advanced age of the interviewees. The monthly family income of 48% was roughly equivalent to the minimum wage, which directly implies reduced access to various means of communication and information in general. It is important to emphasize that in recent studies, it was found that low level of education and low socioeconomic level of adolescents are directly linked to a lack of knowledge on matters related to sexuality and early pregnancy (SOUSA, 2009).

The data in Table 1 show the respondent's perceptions of the variables and practices in in relation to sexual health.

Table 1 – Sexual health from adolescents' perspective

VARIABLE S	*f*	%
Areas related to sexual health		
Methods of contraception	13	22
Sexual behavior	11	18
STIs	08	13
Human reproduction	05	09
Reproduction rights	03	05
All are correct	14	23
Don't know	06	10
TOTAL	60	100%

When asked about which variables were directly related to sexual health, only 23% of the respondents replied that all the variables listed above are directly related to sexuality; 10% did not know how to respond, 22% linked sexuality to

contraceptive methods, and 18% mentioned sexual behavior. These findings lead us to believe that the perception of the majority of the respondents is lower than expected, given that only a minority considered sexuality as a broad theme that directly involved with issues related to sex and the exercise of sexuality, from the physiological through to the pathological, legal, social, psychological and behavioral.

With respect to sexual initiation, it is noted that this occurred at an early stage; however, perhaps out of a fear of expressing themselves freely, only 38% of respondents reported being actively engaged in sexual activity. Considering that the sexually active group (53%) had their first sexual encounter at between 13 and 15 years of age, Mendonça; Araújo (2009) argue that it is necessary to have a knowledge of the most frequent age of sexual initiation among adolescents, in order to develop actions to promote sexual and reproductive health before a sexual relationship begins, seeking to create attitudes that will reduce the risks of unprotected sex and promote a healthier start to sexual activity.

Sexual orientation according to Gherpelli (2007) assumes a systematization of the knowledge acquired about sexuality, through information and experiences. This is an activity that is characterized as an intervention in preventative, intentional and systematic education, through clarification, additional information, and reflections on aspects related to sexuality. When asked about their sources of information on the subject, it was found that 97% said they had received information about sexuality. Of these, (95%) mentioned having received sex guidance at school; 90% reported that they were satisfied with the role of their school, emphasizing that it used educational lectures as the main form of teaching sex education.

The data in Table 2 show the interviewees' use of contraceptive methods. It was found that only 33% used a form of contraceptive, while 67% did not use any contraception. This finding is disturbing, given that the majority of respondents did not have a stable sexual partner, making them more vulnerable to STIs, AIDS, and unplanned pregnancy.

Table 2 – Use of methods of contraception

VARIABLE S	*f*	%
Use of contraception		
No	15	67
Yes	08	33
TOTAL	**23***	**100**
Reason for not using any method		
Partner doesn't accept	10	67
Don't like it	04	27
No knowledge of it	01	06
TOTAL	**15****	**100**
What are the methods used		
Male condom	04	50
Pill	02	25
Female condom	01	12,5
Injection	01	12,5
TOTAL	**08**	**100**
Where obtained		
Pharmacy	04	50
Family Health Units	02	25
From parents or partners	02	25
TOTAL	**08**	**100**

*The values shown relate only the interviewees who are actively engaging in sex. **The values shown refer to interviewees who reported that they do not use any method of contraception.

The respondents who did not use contraceptive methods linked this fact to non-acceptance on the part of the partner; 27% said they did not like using any method, and 6% reported that they had no knowledge in this regards. Of the respondents who used contraceptive methods, 50% mentioned the use of male condoms, 25% the pill, 12.5% the female condom, and 12.5% injectable contraceptives. A positive point of this finding is that more than half of those who used prevention used a condom, which besides being helping prevent pregnancy, is also effective against STIs and AIDS.

When asked where they purchased contraceptives, 50% said they bought them at a pharmacy, only 25% got them for free at the Family Health Units - HSFs, while the remaining 25% of the respondents said they were given contraceptives by their parents or partners. It appears that despite the interviewees having low-income, the vast majority chose to buy the method used, a fact that may be related to a lack of information and access to family planning programs carried out in the FHUs, or perhaps due to the fact that the adolescents did not want to disclose their active sexual life, due to shame or fear of reprisals.

FINAL CONSIDERATIONS

The majority of respondents were female, and of low socio-economic level, a reality that can negatively influences the knowledge about sexuality, as evidenced by the fact that the interviewees did not have good knowledge about this subject, given that a minority understood sexuality as something more complex, while the vast majority considered it in terms of isolated factors: sex, sexual behavior, use of contraceptive methods; and some respondents said they did not know what it was about.

With regard to sexual initiation, less than half of the respondents claimed to have actively engaged in sex; of these, only 33% mentioned using any method of contraception. This is a worrying finding, given the higher vulnerability of adolescents. The male condom was the method most cited by the interviewees; the adolescents considered it effective not only for avoiding unplanned pregnancy, but also for preventing STIs.

The adolescents are satisfied with the interventions of the school in regard to sexual education. Despite this, however, many adolescents have not yet realized the importance of using contraception, which demonstrates a need to reflect on the way sex education is being taught, as this should be started and assumed as early as possible by the parents, and complemented by the school and professionals and health services that work with adolescents, in order to provide them with self-knowledge, so that they can make positive choices for their lives and the expression of their sexuality.

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SEXUAL HEALTH FROM THE PERSPECTIVE OF ADOLESCENT SCHOOL PUPILS

ABSTRACT

Adolescence is a period marked by intense transformations and accelerated physical growth and sexual maturation. Objectives: To identify the knowledge of sexual health, among adolescent students of a public secondary school; to identify the contraceptive methods used; and to assess the adolescents' level of satisfaction of adolescents concerning role of the school in sex education. Method: descriptive-exploratory field research with a quantitative approach, performed with 60 adolescents of a public school in the Brazilian municipality of Cajazeiras - PB. The study was approved by the Research Ethics Committee of the Faculdade Santa Maria under protocol no. 430022010. Data were collected through a questionnaire, organized in tables and analyzed in the light of the literature. The results indicate that (77%) of the respondents were female (46%) were in the 17 to 18 year age group, 50% were currently enrolled in the 1st year of middle school, and (48%) had family income roughly equivalent to the minimum wage. Only (23 %) showed good knowledge about sexuality, (38%) reported having an active sexual life, (97%) claimed to have had access to guidelines on sexuality, (95 %) mentioned the school as the main area of sexual guidance, through educational lectures, of which (90%) said they were satisfied with the school's performance in this area. However, although this high percentage of interviewees had received guidance, only (33%) used some method of contraception, with male and female condoms being the methods most often used (62.5%). Therefore, it is worth reflecting on the way in which sex education is being conducted; it should be initiated and given as soon as possible by parents and complemented by the school and professionals and health services that work with adolescents, in order to provide them with self-knowledge, so that they can make positive choices for their lives and the expression of their sexuality.

KEYWORDS: Adolescents. Sexuality. Sexual Health.

SANTÉ SEXUELLES DANS LA PERSPECTIVE D'ADOLESCENTS EN ÂGE DE SCOLARITÉ

RÉSUMÉ

L'adolescence est une période marquée par des transformations intenses, une croissance physique accélérée et une maturation sexuelle. Objectifs: identifier la connaissance des adolescents en âge de scolarité d'une institution publique d'enseignement moyen au sujet de la santé sexuelle; identifier les méthodes contraceptives utilisées; évaluer le niveau de satisfaction des adolescents au sujet du rôle de l'école face à l'éducation sexuelle. Méthode: recherche sur le terrain, à caractère descriptivo-explicatoire, avec abordage quantitatif, réalisée chez 60 adolescents d'une école publique de la ville de Cajazeiras – PB. L'étude a été approuvée par le Comité d'Éthique en Recherche de la Faculté Santa Maria sous le protocole nº430022010. Les données ont été collectées à travers un questionnaire, ensuite mises à disposition dans des tableaux et analysées à la lumière de la littérature. Les résultats montrent que (77%) des interviewés sont du sexe féminin, (46%) sont âgés entre 17 et 18 ans, 50% sont en 1ère année de l'enseignement moyen et (48%) possèdent un revenu familial d'un salaire minimum. Seulement (23%) ont présenté une connaissance bien élaborée au sujet de la sexualité, (38%) ont affirmé avoir une vie sexuelle active, (97%) ont affirmé avoir accès à des orientations sur la sexualité, (95%) ont mentionné l'école comme principal espace d'orientation sexuelle, à travers de conférences éducatives, desquels (90%) se disent satisfaits de la performance de l'école face à cette thématique. Cependant, malgré le fait que ce grand pourcentage d'interviewés ait reçu des orientations, seulement (33%) utilisent un moyen contraceptif, étant le préservatif masculin et féminin les méthodes les plus utilisées (62,5%). De cette manière, il est pertinent de réfléchir sur le mode selon lequel l'éducation sexuelle est conduite, celle-ci doit être débutée et assumée le plus tôt possible par les parents et complémentée par l'école, les professionnels et les services de santé les plus proches des adolescents afin de favoriser leur connaissance de soi pour qu'ils puissent faire des choix positifs pour leur vie et l'expression de leur sexualité.

MOTS-CLÉS: Adolescence. Sexualité. Santé sexuelle

SALUD SEXUAL SEGÚN LA PERSPECTIVA DE ESCOLARES ADOLESCENTES

RESUMEN

La adolescencia es un período marcado por intensas transformaciones y acelerado crecimiento físico y maduración sexual. Objetivos: Identificar los conocimientos de escolares adolescentes, de una institución pública de enseñanza secundaria, acerca de la salud sexual; identificar los métodos contracepcionales utilizados; evaluar el nivel de satisfacción de los adolescentes con respecto al papel de la escuela frente a la educación sexual. Método: investigación de campo, de carácter descriptivo-exploratorio, con enfoque cuantitativo, realizada con 60 adolescentes de una escuela pública del Municipio de Cajazeiras - Estado de Paraíba, Brasil. El estudio fue aprobado por el Comité de Ética en Investigaciones de la “Faculdade Santa Maria” bajo el protocolo nº 430022010. Los datos fueron recolectados mediante un cuestionario, enseguida fueron puestos a disposición en tablas y se analizaron a la luz de la literatura. Los resultados señalan que (77%) de los entrevistados son del sexo femenino, (46%) están en el nivel de edad de 17 a 18 años, 50% cursan el 1er año de la enseñanza secundaria y (48%) tienen renta familiar de un sueldo/salario mínimo. Solamente (23%) presentaron un conocimiento bien elaborado acerca de la sexualidad, (38%) afirmaron tener vida sexual activa, (97%) afirmaron haber tenido acceso a orientaciones sobre sexualidad, (95%) mencionaron a la escuela como el principal espacio de orientación sexual, por medio de conferencias educativas, de los cuales (90%) se dicen estar satisfechos con la actuación de la escuela cuanto a estos temas. No obstante, aunque este gran porcentaje de entrevistados haya recibido orientaciones, solamente (33%) utilizan algún método contraceptivo, siendo los preservativos masculino y femenino los métodos más utilizados (62,5%). De esa forma, es pertinente reflexionar sobre el modo

por el cual la educación sexual está siendo realizada; esta debe ser iniciada y asumida, en la más temprana edad posible, por los padres, siendo complementada en la escuela, y por profesionales y servicios de salud que están más cerca de los adolescentes, a fin de propiciarles el autoconocimiento, para que puedan hacer selecciones positivas referentes a sus respectivas vidas y la expresión de su sexualidad.

PALABRAS CLAVE: Adolescentes. Sexualidad. Salud sexual.

SAÚDE SEXUAL NA PERSPECTIVA DE ADOLESCENTES ESCOLARES

RESUMO

A adolescência é um período marcado por intensas transformações e acelerado crescimento físico e maturação sexual. Objetivos: Identificar o conhecimento de adolescentes escolares de uma instituição pública de ensino médio acerca da saúde sexual; identificar os métodos contraceptivos utilizados; avaliar o nível de satisfação dos adolescentes acerca do papel da escola frente à educação sexual. Método: pesquisa de campo, de caráter descritivo-exploratório, com abordagem quantitativa, realizada junto a 60 adolescentes de uma escola pública do município de Cajazeiras - PB. O estudo foi aprovado pelo Comitê de Ética em Pesquisa da Faculdade Santa Maria sob o protocolo nº430022010. Os dados foram coletados através de um questionário, em seguida disponibilizados em tabelas e analisados à luz da literatura. Os resultados apontam que (77%) dos entrevistados são do sexo feminino, (46%) estão na faixa etária 17 e 18 anos, 50% cursam o 1º ano do ensino médio e (48%) possui renda familiar de um salário mínimo. Apenas (23%) apresentaram um conhecimento bem elaborado acerca da sexualidade, (38%) afirmaram ter vida sexual ativa, (97%) afirmou ter tido acesso a orientações sobre sexualidade, (95%) mencionou a escola como principal espaço de orientação sexual, através de palestras educativas, dos quais (90%) se dizem satisfeitos com a atuação da escola frente a esta temática. Entretanto, embora este grande percentual de entrevistados tenha recebido orientações, apenas (33%) utilizam algum método contraceptivo, sendo o preservativo masculino e feminino os métodos mais utilizados (62,5%). Dessa forma, é pertinente refletir sobre o modo pelo qual a educação sexual esta sendo conduzida, esta deve ser iniciada e assumida o mais cedo possível pelos pais e complementada pela escola e profissionais e serviços de saúde mais próximos dos adolescentes, a fim de propiciá-los o autoconhecimento, para que possam fazer escolhas positivas para a sua vida e a expressão da sua sexualidade.

PALAVRAS CHAVES: Adolescentes. Sexualidade. Saúde sexual.