

**KNOWLEDGE ABOUT, ATTITUDE TOWARDS REPRODUCTIVE
HEALTH AND HEALTH SEEKING BEHAVIOR
OR ADOLESCENTS IN ILOILO CITY**

Nenalyn D. Abioda and Carolyn L. Yoro

ABSTRACT

The main objective of this study was to assess the knowledge of and attitude towards Reproductive Health (RH) and their relationship to the health seeking behavior of adolescents in all high schools in Iloilo City. This is a descriptive-relational study that used the one-shot survey design. The respondents were the 332 randomly selected fourth year students enrolled in private and public high schools supervised by DepEd and Higher Education Institutions with high school department in Iloilo City for SY 2007-08. Results revealed that the majority of the students belong to the younger age group, are females, enrolled in public high school and residing within Iloilo City; had average level of knowledge about RH, had neutral attitude towards RH, and with good health seeking behavior. A significant relationship existed between: the type of school where the students are enrolled and their knowledge about and attitude towards RH; students' sex, type of school where they are enrolled, location of residence, attitude and their health seeking behavior; knowledge about and their attitude towards RH. No significant relationship existed between: the students' age, sex and location of residence and their knowledge about and attitude towards RH; students' age and knowledge about RH and health seeking behavior; and knowledge about RH and their health seeking behavior when attitude was controlled.

Keywords: Reproductive health, health seeking behavior, adolescents

INTRODUCTION

Background/Rationale of the Study

Adolescents mature and become sexually active but most of them are not aware of sexual and reproductive health and related risks (Population Report, 1995).

Neglect of these needs has a major implication for the future, since sexual behavior during adolescence has far reaching consequences for later life. More often than not, young people learn about sex from each other but sometimes, the information shared around is not accurate and can be harmful. Most of them face these risks with too little factual information, too little guidance about sexual responsibility, and too little access to health care. However, a study conducted by Lou, et. al. (2006) in Shanghai, China showed a high level of knowledge about sexual and reproductive health among young male and female participants.

In terms of attitude towards sex and sexuality, studies revealed that more boys than girls had liberal attitudes towards sex and sexuality (YAFS, 2002). Furthermore, survey result revealed that young women and men think that it is alright to live together even if they have no plans to marry, confirming the liberal attitudes of a growing number of our youth (from <http://www.popcom.gov.ph/appr/spps02/chap03a.html>).

Adolescents often lack basic reproductive health information and access to affordable confidential reproductive health services (PATH, 1998). Remaneses' (2007) study revealed that there is a need for the provision of medical services to address adolescents' reproductive health needs and support from all sectors of the Local Government Unit (LGU) is important.

Public health policies and programs have focused on the sexual and reproductive needs of adolescents, particularly in the developing countries. This is a result of recognition that adolescents constitute large segments of developing countries' populations that they are disproportionately affected by negative reproductive health outcomes and that services for adults are not responsive to the needs of adolescents (Erulkar, et.al, 2004).

The review of related literature and studies emphasized the importance of reproductive health among adolescents. During adolescence, young people develop their adult identity, move toward physical and psychological maturity, and become economically independent. It was evident from the

study of Njau, et.al. (2004) that adolescents were not well informed about their biology, reproductive health organ, physical growth as well as their normal growth and development issues. It is at this stage when the young are vulnerable to risks such as unwanted pregnancies, the health risks associated with early pregnancy, unsafe abortions, Sexually Transmitted Infections (STIs), and Human Immuno Virus (HIV). It is essential that adolescents and students know how to make informed choices and must be equipped with adequate knowledge about reproductive health, as well as to develop positive or favorable attitudes so as to adopt safer sexual behaviors. Focusing on adolescent reproductive health is both a challenge and an opportunity for health care providers.

The findings of this study will be beneficial to the Health educators/service providers and allied professionals. This may stimulate them to generate ideas and facts on sexuality-related and reproductive health issues vital in the practice of their profession. This will serve as basis for planning programs/ interventions, and activities addressed to the reproductive health needs and problems of adolescents.

Objectives of the Study

This study was conducted to assess the knowledge about and attitude towards Reproductive Health (RH) and their relationship to the health seeking behavior of adolescents in Iloilo City High Schools. Specifically, this study aimed to: (1) determine the students' level of knowledge about RH; (2) describe the students' attitude towards RH; (3) describe the students' health seeking behavior; (4) determine if there is a significant relationship between the students' characteristics in terms of age, sex, type of school and location of residence and their level of knowledge about RH ; (5) determine if there is a significant relationship between the students' characteristics and their attitude towards RH ; (6) determine if there is a significant relationship between the students' characteristics and their health seeking behavior ; (7) determine if a significant relationship exists between the students' level of knowledge about RH and their attitude towards RH; (8) determine if a significant relationship exists between the students' level of knowledge about RH and their health seeking behavior; (9) determine if a significant relationship exists between the students' attitude towards RH and their health seeking behavior; and; (10) determine if there is a significant relationship between the students' level of knowledge about RH and their health seeking

behavior controlling for attitude towards RH. The relationship among variables is shown in Figure 1.

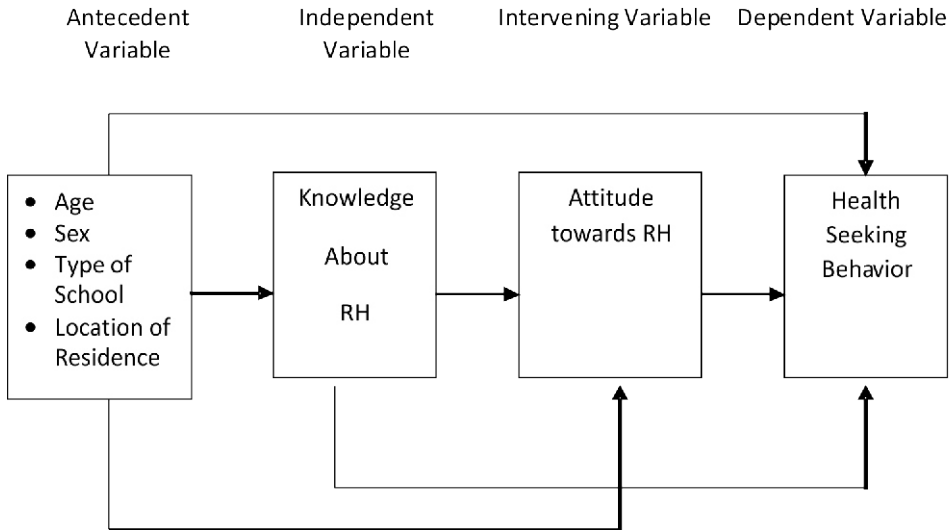


Figure 1. Assumed flow of relationship among variables

METHODOLOGY

The descriptive-relational method of research using a one shot survey design was employed in this study. The respondents of this study were the fourth year students enrolled in private and public high schools supervised by DepEd and Higher Education Institutions with high school department in Iloilo City for SY 2008-2009.

To gather data for the study, two published data-gathering instruments were employed. These were the Attitude Scale (Kelly, 1995), and a 12 item questionnaire on knowledge about reproductive health answerable by “true” or “false”, adopted from Teen Outreach: Youth Development Through Service and Learning (Association of Junior Leagues, 1994). The questions on the health seeking behavior were researcher made. An information sheet intended to obtain data on the students' age, sex, type of school and place of residence was included. The researcher-made questionnaire was submitted

for face and content validation to a panel of three jurors. Their suggestions were considered to improve the items in the questionnaire. To determine the reliability of the data gathering instruments, the same were pilot tested to 5 percent of the sample size in another school not included in the data gathering.

Prior to data gathering, the researchers sought approval from the Ethics Committee of DOST/PCHRD. This is to assure that the rights of the respondents against undue impositions are protected.

All high schools identified were considered. There were forty seven (47) government and private high schools. A list of fourth year students from the different high schools was obtained from the principal's office. Sample size (363) was computed based from the total number of students. When the desired sample size was obtained, stratified sampling using proportional allocation for each school was employed. Respondents per school were selected using simple random technique. However, there were six (6) Private High Schools which were not included in the study because they refused to participate. This reduced the sample size to three hundred thirty two (332).

To determine the level of knowledge of the respondents, scores obtained from the 12-item questions were added and categorized as follows: 9-12 "High knowledge"; 5- 8 "Average knowledge"; 4 and below "Low knowledge".

The attitude questionnaire was composed of 15 attitude statements. The instrument requires the respondent to react to each item, as to whether they; 1= strongly disagree, 2= somewhat disagree, 3= relatively neutral, 4= somewhat agree, and 5= strongly agree. Generally speaking, the higher the obtained total score, the more liberal the attitudes (highest possible score = 75). To interpret the obtained scores, the following scale of scores and their corresponding interpretations were utilized: 51-75 "Liberal"; 26-50 "Neutral"; 25 and below "Conservative".

To gather information on the health seeking behavior of the students, 10 statements that are meant to determine the health seeking behavior of the students about problems and symptoms pertaining to RH were used. The instrument required the student to indicate in each item, whether they; 1= never, 2= sometimes, 3= often, 4= always seek for professional help.

To interpret the obtained scores, average score was computed. The following scale of scores and their corresponding interpretations was utilized: 31-40 "Very Good" 21 - 30 "Good"; 11-20 "Fair"; 1 - 10 "Poor".

Frequency counts and percentage analysis as descriptive statistics were used to present the distribution of respondents as to their characteristics, level of knowledge and attitude towards RH as well as their health seeking behavior.

To determine the relationship between levels of categories, the Chi-square, Cramer's V, Pearson's r, and Partial Correlation set at .05 alpha level were used. Data were processed and analyzed using the Statistical Package for Social Sciences (SPSS) Software.

RESULTS AND DISCUSSION

Characteristics of the Respondents

Data in Table 1 revealed that majority of the respondents were 16 years old and younger, female, enrolled in public high school and residing within Iloilo City.

Table 1. Distribution of Students According to Certain Demographic Characteristics

Characteristics	f	%
Age		
17 years and older	38	11.4
16 years and younger	294	88.6
Total	332	100.0
Sex		
Male	151	45.5
Female	181	54.5
Total	332	100.0
Type of school		
Private	92	27.7
Public	240	72.3
Total	332	100.0
Location of Residence		
Within Iloilo City	298	89.8
Outside Iloilo City	34	10.2
Total	332	100.0

Level of Knowledge about Reproductive Health

As shown in Table 2, majority of the respondents had average level of knowledge about reproductive health while about three in every 10 adolescents had high level of knowledge. Findings of this study support the findings of Abioda (2002) that majority of the students had average level of knowledge about sexuality.

Table 2. Distribution of the Students as to their Level of Knowledge about Reproductive Health

Level of Knowledge about Reproductive Health	f	%
Low	6	1.8
Average	205	61.8
High	121	36.4
Total	332	100.0

Attitude towards Reproductive Health

In terms of attitude towards reproductive health, 184 (55.4 %) of the respondents had neutral attitude while 148 (44.6 %) had liberal attitude (Table 3).

Table 3. Distribution of the Students as to Their Attitude towards Reproductive Health

Attitude towards Reproductive Health	f	%
Conservative	0	0.0
Neutral	184	55.4
Liberal	148	44.6
Total	332	100.0

Health Seeking Behavior

As to the students' health seeking behavior, two-thirds (66.9%) of the students had good health seeking behavior while one-fifth (22.0%) had fair health seeking behavior. On the other hand, only eleven percent (11.1 %) had very good health seeking behavior (Table 4). The result of the study contradicts the findings of Njau, et.al (2004) that only a few adolescents sought health services from health centers, clinics and hospital. Furthermore, it was mentioned in the study that other adolescents sought treatment from traditional healers and herbalists.

Table 4. Distribution of Students According to their Health Seeking Behavior

Health Seeking Behavior	f	%
Fair	73	22.0
Good	222	66.9
Very Good	37	11.1
Total	332	100.0

Respondents' Characteristics and Knowledge about Reproductive Health

Among the antecedent variables identified, only the type of school where the respondents were enrolled was significantly related to their knowledge about reproductive health. However, findings do not support the results of the survey conducted by IYARHS (Indonesia Young Adult Reproductive Health Survey, 2002-2003) which revealed that the schools have not been recognized as a key source of information on reproductive health knowledge of students. Result of this study negates the findings of Abioda (2002) that students' level of knowledge about sexuality differs significantly according to age. However, findings of Begum (2006), Das (2007) and Bhuiya (2004) found that level of knowledge among mid adolescent girls was higher than that of boys. Data is presented in Table 5.

Respondents' Characteristics and Their Attitude towards Reproductive Health

Among the selected characteristics, only the type of school where the respondents were enrolled is significantly related to their attitude towards

Table 5. Distribution of the Students as to Certain Characteristics and Their Level of Knowledge about Reproductive Health

Characteristics	Level of Knowledge about RH						Total	
	Low		Average		High		f	%
	f	%	f	%	f	%		
Age								
16 yrs. old and younger	3	1.0	182	61.9	109	37.1	294	100.0
17 yrs. old and older	3	7.9	23	60.5	12	31.6	38	100.0
r = -.097 (not significant at the 5% level of probability)						p = .077		
Sex								
Male	5	3.3	91	60.3	55	36.4	151	100.0
Female	1	0.6	114	63.0	66	36.5	181	100.0
$X^2 = 3.565$ (not significant at the 5% level of probability)					df = 2	p = 0.168		
Type of School								
Private School	-	-	41	44.6	51	55.4	92	100.0
Public School	6	2.5	164	68.3	70	29.2	240	100.0
$X^2 = 20.976$ (significant at the 5% level of probability)					df = 2			
p = .000			Cramer's V = 0.251					
Location of Residence								
Within Iloilo City	6	2.0	189	63.4	103	34.6	298	100.0
Outside Iloilo City	-	-	16	47.1	18	52.6	34	100.0
$X^2 = 4.836$ (not significant at the 5% level of probability)					df = 2	p = 0.089		

RH (Table 6). The results of the study are supported by the findings of Abioda (2002) that the type of school where the students are enrolled is a significant factor that may influence the students' attitude towards sexuality. However, age, sex, and location of residence were not significantly related to their attitude towards RH. The result of the study negates the findings of YAFS (2002) that both male and female have liberal attitude towards RH.

Selected Characteristics of the Respondents and Health Seeking Behavior

Data in Table 7 show that sex, type of school and location of residence were significantly related to the respondents' health seeking behavior. The Population Council (2001) reported that more females seek reproductive health services than males. This may be because most of the reproductive health services are focused on women.

Table 6. Distribution of Students as to Certain Characteristics and Their Attitude towards Reproductive Health

Characteristics	Attitude towards Reproductive Health				Total	
	Neutral		Liberal		f	%
	f	%	f	%		
Age						
16 yrs. old and younger	161	54.8	133	45.2	294	100.0
17 yrs. old and older	23	60.5	15	39.5	38	100.0
$r = 0.004$ (not significant at the 5% level of probability)				$p = 0.949$		
Sex						
Male	80	53.0	71	47.0	151	100.0
Female	104	57.5	77	42.5	181	100.0
$X^2 = 0.668$ (not significant at the 5% level probability)				$df = 1$	$p = 0.414$	
Type of school						
Private School	42	45.7	50	54.3	92	100.0
Public School	142	59.2	98	40.8	240	100.0
$X^2 = 4.917$ (significant at the 5% level of probability)				$df = 1$	$p = 0.027$	
Cramer's V = 0.122						
Location of Residence						
Within Iloilo City	166	55.7	132	44.3	298	100.0
Outside Iloilo City	18	52.9	16	47.1	34	100.0
$X^2 = 0.094$ (not significant at the 5% level probability)				$df = 1$	$p = 0.759$	

Table 7. Distribution of the Students as to Certain Characteristics and Their Health Seeking Behavior

Characteristics	Health Seeking Behavior						Total	
	Fair		Good		Very Good		f	%
	f	%	f	%	f	%		
Age								
16 yrs. old and younger	61	20.7	200	68.0	33	11.2	294	100.0
17 yrs. old and older	12	31.6	22	57.9	4	10.5	38	100.0
$r = -0.028$ (not significant at the 5% level of probability)							$p = .613$	
Sex								
Male	38	25.2	88.0	58.3	25	16.6	151	100.0
Female	35	19.3	134	74.0	12	6.6	181	100.0
$X^2 = 11.606$ (significant at the 5% level of probability)						$df = 2$	$p = 0.003$	
Cramer's V = 0.187								
Type of school								
Private School	8	8.7	70	76.1	14	15.2	92	100.0
Public School	65	27.1	152	63.3	23	9.6	240	100.0
$X^2 = 13.739$ (significant at the 5% level of probability)						$df = 2$	$p = 0.001$	
Cramer's V = 0.203								
Location of Residence								
Within Iloilo City	70	23.5	199	66.8	29	9.7	298	100.0
Outside Iloilo City	3	8.8	23	67.6	8	23.5	34	100.0
$X^2 = 8.202$ (significant at the 5% level of probability)						$df = 2$	$p = 0.017$	
Cramer's V = 0.157								

Level of Knowledge and Attitude towards Reproductive Health

Knowledge about reproductive health is significantly related to the respondents' attitude towards reproductive health (Table 8). This result is supported by the findings of IYARHS (2002-2003) and Jaffer and Afifi (2005), that adolescents' reproductive health knowledge is associated with their attitudes.

Table 8. Distribution of the Students as to Their Knowledge about RH and their Attitude towards RH

Attitude towards Reproductive Health	Level of Knowledge about Reproductive Health						Total	
	Low		Average		High			
	f	%	f	%	f	%	f	%
Neutral	5	83.3	116	56.6	63	52.1	184	55.4
Liberal	1	16.7	89	43.4	58	47.9	148	44.6
Total	6	100.0	205	100.0	121	100.0	332	100.0

$r = 0.118$ (significant at the 5% level of probability)

$p = .032$

Level of Knowledge and Health Seeking Behavior

Data in Table 9 shows that the respondents' level of knowledge about reproductive health is not significantly related to their health seeking behavior. The result of the study corroborates with the findings of Njau, et.al. (2004) and Bhuiya, et.al. (2004) that despite adolescents' awareness on the health care facility, they do not seek reproductive health services.

Table 9. Distribution of the Students as to Their Knowledge about RH and their Health Seeking Behavior

Health Seeking Behavior	Level of Knowledge about Reproductive Health						Total	
	Low Knowledge		Average Knowledge		High Knowledge			
	f	%	f	%	f	%	f	%
Fair	4	66.7	45	22.0	24	19.8	73	22.0
Good	2	33.3	139	67.8	81	66.9	222	66.9
Very Good	-	-	21	10.2	16	13.2	37	11.1
Total	6	100.0	205	100.0	121	100.0	332	100.0

$r = 0.038$ (not significant at the 5% level of probability)

$p = 0.494$

Attitude towards RH and Health Seeking Behavior

As shown in Table 10, attitude of the respondents toward reproductive health is significantly related to their health seeking behavior. The result of the study contradicts the findings of Moronkola and Uzuego (2006) that in spite of the students' positive attitude towards menstruation only a few consulted with the doctor whenever they experience menstrual symptoms.

Table 10. Distribution of the Students as to Their Attitude towards RH and their Health Seeking Behavior

Health Seeking Behavior	Attitude towards Reproductive Health				Total	
	Neutral		Liberal		f	%
	f	%	f	%		
Very Good	15	8.2	22	14.9	37	11.1
Good	118	64.1	104	70.3	222	66.9
Fair	51	27.7	22	14.9	73	22.0
Total	184	100.0	148	100.0	332	100.0

r = 0.143

p = 0.009

Level of Knowledge about RH and Health Seeking Behavior Controlling for Attitude towards RH

Level of knowledge about reproductive health is not significantly related to the health seeking behavior of the respondents when their attitude was controlled (Table 11). This means that given the same level of knowledge, when students are not bothered by their attitude towards RH, the students will still show good health seeking behavior.

Table 11. Distribution of the Students as to Their Knowledge about RH and Their Health Seeking Behavior Controlling for Attitude towards RH

Health Seeking Behavior	Attitude towards Reproductive Health										Total			
	Neutral					Liberal								
	Level of Knowledge										f	%		
	High		Average		Low		High		Average				Low	
f	%	f	%	f	%	f	%	f	%	f	%	f	%	
Very Good	7	11.1	8	6.9	0	0.00	9	15.5	13	14.6	0	0.00	37	11.3
Good	41	65.1	76	65.5	1	20.0	40	69.0	63	70.8	1	100.0	222	66.8
Fair	15	23.8	32	27.6	4	80.0	9	15.5	13	14.6	0	0.00	73	21.9
Total	63	100.0	116	100.0	5	100.0	58	100.0	89	100.0	1	100.0	332	100.0

Partial r = 0.0212 (not significant at the 5% level of probability)

p = 0.700

CONCLUSIONS AND RECOMMENDATIONS

Conclusions

Majority of the respondents belong to the younger age group, females, enrolled in public high school and residing within Iloilo City.

Majority had average level of knowledge about reproductive health, had neutral attitude towards reproductive health, and with good health seeking behavior.

Significant relationship existed between the type of school where the respondents are enrolled and their knowledge about and attitude towards reproductive health.

Significant relationship existed between the respondents' sex, type of school where they are enrolled and location of their residence and their health seeking behavior.

A significant relationship existed between the respondents' level of knowledge about reproductive health and their attitude towards reproductive health.

A significant relationship existed between the respondents' attitude towards reproductive health and their health seeking behavior.

Recommendations

Since the students had average knowledge about reproductive health, it is recommended that extra effort should be done to improve the students' level of knowledge especially in the areas of male and female sexuality, STDs and methods of contraception. The strategy could vary from the conduct of seminars, symposia, lectures, group discussions, experiential learning, film showing or inviting resource persons considered as authority in RH, so the students can be reminded of the need to maintain a healthy life.

Early education and information sharing for adolescents' information service providers: the parents, teachers, community, church, health staff, media, and NGOs on adolescent health concerns and intensified and responsive counseling services shall be done. Education programmes need to tailor some of their messages to suit the needs of adolescents.

Teachers and guidance counselors should be trained to deal with topics in human sexuality because many of them are not comfortable with such topics. Their attendance to trainings, seminars, and workshops concerning sexuality among adolescents, their problems, attitudes, behavior/practice is highly recommended. The school administrators are encouraged to develop a curriculum wherein topics related to sexuality can be integrated. This should be ideally implemented before the adolescents become sexually active.

The students' "neutral" attitude towards RH may indicate that sooner or later they will become sexually active. Health educators, teachers and guidance counselors should understand that sexuality is a part of human existence and that proper understanding of one's sexuality could be helpful in dealing with one's attitude and will eventually lead to desirable health seeking behavior. By this, they will be properly guided and treated promptly thus preventing complications.

Health care providers, teachers, guidance counselors, and parents should take extra effort to inculcate values to young adolescents which will lead them to positive attitude towards reproductive health and eventually desirable health seeking behavior.

Health care providers, guidance counselors, and teachers should develop positive and a welcoming attitude to adolescents who may need these services in terms of problems about sexuality and reproductive health as a whole. It should also be emphasized that confidentiality should be strictly observed in dealing with the sensitive and personal problems of the adolescents. Service providers can work with other sectors to collectively address adolescent health issues especially reproductive health.

Although the students had good health seeking behavior especially among the females, it is still recommended that the students should participate in activities that the DepEd will implement concerning reproductive health through seminars, film showing, and lecture forum.

Program planners should involve young people in designing, planning and implementation, monitoring and evaluation of activities and programs to ensure that it is acceptable, appealing and relevant to them.

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