

Assessing The Knowledge, Perception and Utilization of Youth Friendly Health Services Amongst Adolescents in Selected Secondary Schools in Lagos State

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Abstract:

The study assessed the knowledge, perception and utilization of youth friendly health services amongst adolescents in selected secondary schools in Ikeja (Lagos). This study adopted a descriptive cross-sectional design which was aimed at determining the knowledge, perception and utilization of youth friendly health services. The sample consisted of 360 students drawn among adolescents in selected secondary schools in Ikeja (Lagos). The sampling technique adopted in this study was multi-stage sampling technique. The source of data that was used in this research was gotten through the use of questionnaire. Face and content validity of the instrument (questionnaire) was carried out by experts in Nursing Science and Tests and Measurement. The data collected were subjected to descriptive and inferential statistics. The result of the study showed that the knowledge level of the participants was very high while the perception of the respondent was very low. It was also revealed that the level of their perception affected the level of utilization of the youth friendly health services. Based on the findings of the study, it was recommended among others that there should be a constant evaluation check on the health care providers on how they provide their services. Also, training should be done for the health care providers to keep them in track on how to deal with

EASIJ

Accepted 8 July 2021

Published 29 July 2021

DOI: 10.5281/zenodo.5145281



the adolescents.

Keywords: Knowledge, Perception, Utilization, Health Services, Adolescents,

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Introduction

Use of health services is key factor to adolescent health and well-being (Azfredick, 2015). Adolescent make up a large and developing aspect of many societies. Globally there are 1.7 billion young people aged 10-24 years representing one quarter of the world's population, with over 85% living in developing countries (population reference bureau, 2006). With over 158 million people, Nigeria is the most populous nation on the African continent; it also encompasses 250 ethnic groups and 380 languages. The country boasts a vast range of traditional, political, cultural, and religious practices that vary by geography. The population is disproportionately young 47 million Nigerians are between the ages of 10 and 24 (USAID, 2013). In Nigeria adolescents (10-24 yrs) account for over 46% of the population (National Population Commission, 2006)

Adolescence or second phase of life, is a phase in which an individual undergoes major physical and psychological changes. Alongside this, there are huge changes in social interaction and relationship. It is a phase in an individual's life rather than a fixed period a phase where by an individual is not yet an adult but is no more a child. Adolescence is a time of opportunity but also a time of risk. It presents a window of opportunity because action could be taken during this phase to set the stage for healthy adulthood and to reduce the chances of problems in the years that are before them (e.g prevention of cardiovascular diseases through avoiding tobacco use ,eating healthy and doing exercise) at the same time, it is a phase of risk ,a phase when health problems that have serious immediate consequences can and do occur (such as deaths resulting from road traffic injuries and sexually transmitted disease infections and unwanted pregnancies as a result from unprotected sexual activity) a period when problem behaviours that could have serious adverse effects on health in the future (such as tobacco use smoking, alcohol consumption) are initiated.

Global interest in the health of adolescents and youth has manifested itself in the many expressions of commitment to their healthy personal, spiritual, social, mental and physical development (World Health Organization, 2007). The young people are the future of the society, but are also very much it's present. Around half of the world's inhabitants are under age of 20. The youth population is growing in some countries, and in these areas and elsewhere adolescents are challenged with new situations and threats to their present health, moving towards a future in which their health status is likely to be conceded. The health education and social sectors are called upon to devise, test and make wider use of effective new approaches, including operational, social science and community based research, clinical studies and longitudinal survey focused adolescents and youth to help improve the health and wellbeing of youth through improvement and initiation of youth friendly health services .the hope of development of any nation lies in its youth.

Experts have estimated that more than one third of the 600,000 female Nigerians who obtain abortion each year are adolescents (Bankole & Malarcher, 2010; Valerie, 2016). It has been revealed in Nigeria that 80% of Nigerian patients with abortion complications were adolescents. Studies have also shown that lack of sexual health information and services may predispose these young people to unwanted pregnancies, unsafe abortions, sexually transmitted infections and HIV/AIDS. In addition, early marriage and child bearing which are common practices in some parts of the country, tend to limit educational and employment

opportunities of many young people. In order to reduce maternal and infant mortality as well as high rates of sexually transmitted infections and school dropout due to unwanted pregnancies, Nigeria developed a national reproductive health policy on sexual behaviours during adolescence. Despite growth of youth friendly services it has been reported that utilization of available health services is recorded to be lowest amongst youths.

In view of the above, the study assessed the knowledge, perception and utilization of youth friendly health services amongst adolescents in selected secondary schools in Lagos State. This study specifically:

1. determined the level of knowledge of adolescents about youth friendly health services;
2. assessed the adolescents perception towards youth friendly health services; and
3. determined the level of utilization of youth friendly health services among adolescents

Research Questions

The following research questions were raised for this study:

1. What is the knowledge of adolescents about youth-friendly health services?
2. What is the perception of adolescents towards youth-friendly health services?
3. How much do the adolescents utilize these youth-friendly health services?

Research Hypotheses

These hypotheses were postulated for this study:

1. There is no significant relationship between knowledge and utilization of youth-friendly health services.
2. There is no significant relationship between adolescent's perception and utilization of youth-friendly health services.

Methodology

This study adopted a descriptive cross-sectional design which was aimed at determining the knowledge, perception and utilization of youth friendly health services among adolescents in selected secondary schools in Ikeja (Lagos). The population of students in State Senior High School Ikeja is 1085, furthermore the population of students in Omole Senior high School is 1017 and the population of students in Ikeja senior high school is 1423. Therefore the total population to be used for this study was 3525. The sample size of 360 was determined by the use of Yamane's formula. The sampling technique adopted in this study was multi-stage sampling technique. The instrument used for this research was a questionnaire, which was based on fixed alternative also called close ended questionnaire organized to attain answer from the respondents based on the study. Face and content validity of the instrument (questionnaire) was carried out by giving it to experts of Nursing Science and Tests and Measurement. Copies of the questionnaire were administered with the help of 2 research assistants which was done within a week. The data collected were subjected to descriptive and inferential statistics.

Results

Research Question 1: What is the knowledge of adolescents about youth-friendly health services?

Table 1: Knowledge of respondents about youth friendly health services

Variable	Yes (%)	No (%)
Do you know any youth health centre in Ikeja?	304 (84.4)	56(15.6)
Do you know about youth friendly health services?	360 (100)	0
Do you know of the services they provide?	360(100)	0
Do you know that the youth friendly health centres are for people of ages 15-24?	293(81.4)	67(18.6)
Do you know of the services that are being offered in the health centre?	276(76.7)	84(23.3)
Which of the services do you know of that are being offered in the health centre?		
- Family planning	262(72.7)	98(27.2)
- Voluntary counselling	273(75.8)	87(24.2)
- Treatment of all disease	282(78.2)	78(21.7)
- Treatment of STIs	271(75.3)	89(24.7)
- Care of pregnant teenagers	280(77.8)	80(22.2)
- General health information	277(76.9)	83(23.1)
- Sports and recreation	234(65)	126(35)

In table 1 above, most (84.4%) of the respondents knew there was a youth friendly centre in Ikeja. All (100%) respondents reported to knowing the services youth friendly services provide. The respondents reported to know about the services been rendered at the health centre: (72.7%) of the respondents knew about family planning, (77.8%) of the respondents knew care of pregnant teenagers, (75.8%) of the respondents knew about voluntary counselling, 78.2% of the respondent knew about treatment of all disease, 75.3% of the respondent knew of treatment of STIs, 76.9% of the respondent knew about the provision of general health information as one of the services, and above average 65% of the respondent knew of sports and recreation.

Research Question 2: What is the perception of adolescents towards youth-friendly health services?

Table 2: perception of respondents towards youth friendly services

Variable	Agree (%)	Disagree (%)
I believe youth friendly health services has a very important role to play in healthy living	344 (95.6)	16 (4.4)
I think their services are not youth friendly	241(54.6)	149 (41.4)

I think the health care providers are too old for me	156 (43.3)	204 (56.7)
I am not comfortable sharing health information with the health workers	242 (67.2)	118 (32.8)
I think it is only for the well privileged	169 (46.9)	191 (53.1)
I think visiting the youth health centre increases my risk of exposure to diseases	172 (47.8)	188 (52.2)
I think the health centre is for older adults with higher educational level	169 (46.9)	191 (53.1)
I think there is no difference between the services provided at the general health centre and the youth centre	178 (49.1)	182 (50.6)

In table 2 above, very high percentage (95.6%) of the respondents agreed that youth friendly health services play an important role in their healthy living. Above average of the respondents (56.7%) said that the health providers were too old while more (67.2%) said that they are not comfortable sharing health information with the health workers. Less than half (46.9%) agreed that youth friendly health services is only for the well privileged. (47.8%) revealed that visiting the youth health centre increases their risk of exposure to diseases and few (46.9%) indicated that health centre is for older adults with higher educational level.

Research Question 3: How much do the adolescents utilize these youth-friendly health services?

Table 3: Utilization of youth friendly services by adolescents

Variable	Yes (%)	No (%)
I visit only when I am sick	160(44.4)	200(55.6)
I visit only when I need an information about the services provided	119(33.1)	241(66.9)
The distance is comfortable for me	209(58.1)	151(41.9)
The operating hours are comfortable for me	211(58.6)	149(41.4)
The services are affordable	231(64.2)	129(35.8)
I see no reason for visiting there at all	179(49.7)	181(50.3)

In table 3 above, 44.4% of the respondents agreed that they visited the health centre only when they are sick, slightly more than half of the respondents (55.6%) agreed that they do not only visit when they are sick. 58.1% indicated that the distance is comfortable for them while 41.9% of the respondents disagreed. More than average (58.6%) revealed that the operating hours are comfortable for them. Two hundred and thirty-one (64.2%) said the services are affordable and below average (49.7%) agreed that they see no reason to visit there at all.

Test of Hypotheses

Hypothesis 1: There is no significant relationship between knowledge and utilization of youth-friendly health services.

Table 4: Correlation for knowledge and utilization of youth friendly services

Variables	Knowledge	
	Pvalue *(0.05)	x ²
Utilization	0.000	0.230

***. Correlation is significant at the 0.01 level (2-tailed).*

As shown in table 4 above, p-value is 0.000, therefore the null hypothesis was accepted, showing that there was no significant relationship between knowledge and the utilization of youth friendly services.

Hypothesis 2: there is no significant relationship between adolescent's perception and utilization of youth-friendly health services

Table 5: Correlation between perception and utilization of youth friendly services

Variables	Perception	
	P-value *(0.05)	x ²
Utilization	0.014	0.129

***. Correlation is significant at the 0.05 level (2-tailed).*

As shown in table 5 above, the p-value was 0.014, therefore the null hypothesis was rejected, showing that there was significant relationship between perception and the utilization of youth friendly services.

Discussion

This study has revealed that majority of about 84.4% knew about the existence of a youth-friendly health centre in Ikeja Lagos, LUTH, this is in variance to a study by Valerie (2016) where 79.5% of the resident had no knowledge about the health centre. All the study participants knew about the services provided and their level of knowledge was high at 76% while 32.5% of the respondents received information about these services from the social media while 13.1% of participants heard about the services from their teachers, 6.7% got the information from the school's notice board, 19.7% knew from their parents, 28.1% knew from their friends. This is in line with the study of Saratu *et.al* (2016) that youth who participated in peer to peer discussion were more likely to know about and utilize sexual and reproductive health services than those who never participated.

Findings from this study has shown that the perception of the youth towards the age of the health care provider was somehow high having 43.3% of the respondents agreeing to the fact that the health workers were too old for them while 56.7% disagreed. This indicates that there is a major loop hole in the hospitality aspects of providing these services to these adolescent, this calls for thorough assessment among the health service providers.

The findings of this study also revealed that the level at which the respondents use the youth friendly health services was barely above average at 51%. This is in consonance with a study by Yemi (2012) who discovered that the level of utilization of facilities and services by young people was low. Only 36% of facilities reported above 50 clients and an additional 6% of facilities reported 30-49 clients, 16% reported 15-20 clients in the preceding month, 6% fewer than 15 clients, and 4% of facilities reported zero clients. So this calls for more improvement in the provision of services in order to increase the level of utilization by adolescents.

This research has also shown that services are not totally affordable because 35.8% of the participant did not agree to that fact, so an assessment can be done by the government to check on the affordability of the services so that more adolescents would be able to have access to the services that are been provided. About 58.1% of the respondent agreed to the fact that the distance is to their comfort while 41.9% disagreed. Though most of the respondents (81.4%) reside in Ikeja while only few of the respondents (18.6%) do not reside in Ikeja, so there should be an assessment on why they are not comfortable about the distance between them and these health centres. Meanwhile, the study revealed that there was significant relationship between knowledge, perception and utilization of youth friendly health services. The more knowledgeable the respondent, the higher the level of utilization while the lower their perception, the lower the level of utilization.

Conclusion

The major aim of this study was to assess the knowledge, perception and utilization of youth friendly health services among adolescents. The research has shown that the knowledge level of the participants was very high which is a very positive result but this research has shown that the perception of the respondent was very low. It was also discovered that the level of their perception affected the level of utilization of the youth friendly health services. This study concludes on the fact that more awareness has to be done about how the youth-friendly services are being provided to the adolescents and what they are really about so as to improve their perception to a better thought.

Recommendations

Based on the findings of the study, the following recommendations were made:

1. There should be a constant evaluation check on the health care providers on how they provide their services.
2. Training should be done for the health care providers to keep them in track on how to deal with the adolescents.
3. More education should be done focusing on the importance of using youth friendly health service among adolescents in the local government.
4. There should be a law guiding the age of the health workers in order to change the youth's perception towards the health workers.

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Cite this article:

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