



The Awareness Toward Reproductive Health Concepts and Its Impact on Professional Family Planning

Eyad Aziz Khaled

Family Medicine Consultant, Medicine

Wael Mustafa Al Khalifa

Family Medicine Consultant, Medicine

Abstract

Assessment of awareness and use of family planning methods is important for improving services and policies. Until relatively recently, survival was a more pressing concern for most of the population than controlling population growth through contraceptives. Today, family planning with its various techniques has become an acceptable behavior for the majority of fertile couples. The aim of this research is to assess awareness of reproductive health concepts and their impact on professional family planning. Publications show that the prevalence of family planning is closely related to quality of life as measured by income, life expectancy and education. It may be more appropriate to consider reproductive health as sexual health, since most couples wish to continue sexual relations without fear of unwanted pregnancy. Reproductive health is defined as referring to women of childbearing age and children less than 15 years of age, and it concerns about two-thirds of the population in developing countries. Although a country's reproductive health depends to a large extent on the physical and mental well-being of its women, discrimination against women in education, health, employment, and participation is a serious problem in many countries.

Keywords: *awareness, reproductive health concepts, professional family planning.*



Introduction

The availability of family planning methods and the quality of family planning services are important dimensions of global health policies (Alenezi & Haridi, 2021). With regard to availability, the principles state that health-care facilities, their providers, and contraceptive methods should be available “to ensure that individuals can exercise full choice from the full range of methods” and that, furthermore, contraceptives should be available without information or otherwise barriers. With regard to service quality issues, the principles state that “the customer’s interactions with the service provider respect informed choice, privacy, confidentiality, and customer preferences and needs” (Family Planning Rights and Empowerment Working Group, 2014).

Monitoring and evaluating awareness and use of family planning methods in communities is important for improving the quality and effectiveness of services, policies, and planning, with beneficial effects on the health and quality of life of women, children, families and communities. An important aspect of research in this regard is to explore the views and practices of women of reproductive age regarding family planning and fertility preferences, so our aim in this study is to assess the awareness, attitude, and use of family planning methods among women (Alenezi & Haridi, 2021).

Reproductive health of a woman is considered in all phases of her life, starting from the infancy stage to the postmenopausal stage. Or it is defined as the passing of a woman’s reproductive age in a sound health, psychological and social framework (Kantorová, 2020). Reproductive health is considered as an organic, psychological and social integration



(Al-Mu'tazallah, 2000). Childbirth regulation is the administrative and positive behavior of the spouses towards following a special time program to have a limited number of children and the use of certain means of family planning in line with the circumstances of each family (Abu Sakina, 2000).

The current research produced background information about awareness of reproductive health concepts and their impact on professional family planning. The paper hopes to provide vital information regarding some of the reproductive health issues that groups of society have experienced or may already encounter and answer some confidential questions related to adolescent sexuality. At the same time, the researcher also expects a more flexible position in terms of policy making and program implementation involving this sensitive issue.

Reproductive Health

Reproductive health is one of the areas of health education, through which the offspring can be preserved and it is a healthy, strong and disease-free product that can produce and build society. Reproductive health has been defined by many educational researchers, as Abu Al-Hamayel et al., (2010) defined it as “the state of completeness of the individual from the physical, mental and social point of view, and devoid of the mother’s land or defects related to the reproductive system and its functions and functions. Thus, they are able to practice a safe sexual life and safe childbirth, and have the freedom to make related decisions (Abu-Al-Hamayel., 2010).

Al-Baghdadi (2008) also defined it as “a set of methods, methods and services that contribute to reproductive health and it also includes sexual



health that aims to improve the quality of life and holistic, charitable personal relationships.” medical care in relation to childbearing and sexually transmitted diseases (Al-Baghdadi, 2008).

The International Conference on Population and Development in Cairo defined the term reproductive health for the first time in 1994 as a state of complete physical, mental and social well-being in all matters related to the reproductive system, its functions and operations, and not merely safety from disease or disability (Family Planning Rights and Empowerment Working Group , 2014). Therefore, reproductive health means the ability of people to enjoy a satisfactory sexual life. and their ability to have children, and their freedom to decide on the time and frequency of childbearing, and consequently the right of men and women to know and use safe, effective, accessible and acceptable family planning methods in their view. Reproductive health includes several elements, the most important of which are: family planning information and services, prenatal care, safe delivery, care after live birth and after fetal death (World Health Organization, 2020), prevention and treatment of sexually transmitted diseases, infertility prevention and treatment, violence against women, services for diagnosis and treatment of reproductive cancers, Menopause services, the needs of adolescents, young adults and men (Higher Population Council, 2009).

The concept of reproductive health has received wide attention from the international community with its governments and organizations, including non-governmental organizations and agencies, whose contributions in this field have taken many forms, embodied either in providing technical or financial assistance and grants (Abu Kamil, 2011).



The Millennium Development Goals came to reflect people's basic aspirations for a better life through a selected series of specific goals with clear numbers and time frames during the period between 1990-2015, where the countries agreed to (Alenezi & Haridi, 2021):

- Reducing poverty and hunger rates in half.
- The application of primary education at a comprehensive level.
- Promoting gender equality.
- Reducing the mortality rate among children under the age of five to two-thirds.
- Reducing the maternal mortality rate to three quarters.
- Fighting HIV, malaria and tuberculosis.
- Ensuring environmental sustainability.
- Building a global partnership for development.

At the International Conference on Population and Development held in Cairo in 1994, the concept of reproductive health was crystallized, which means having a satisfactory and safe sex life, the ability to reproduce, and the freedom to decide when to have children. This concept emphasizes the role of women and men together in the development and implementation of reproductive health programs, with emphasis on the importance of the participation of youth groups (Asio, 2019).

It is considered the International Conference on Place and Development, which was held in Cairo in 1994 (our corner is essentially on the international level in provoking the concerns about the health of children, as well as re-affirming the scientific necessity of view in the aspects of the behavior of the validity of the validity of the validity of the values that are



in general, and the most important of the values related to the validity of the values that are in general (Abu Kamil, 2011). This conference is new concepts that are still the subject of controversy in many areas such as rights and equity, self-affirmation, and responsibility in personal relationships, and not only the needs and services related to reproductive health (Elissar, 2003).

In the Program of Action of the International Conference on Population and Development, "reproductive health" is defined as a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity in all matters relating to the reproductive system, its functions and operations. Reproductive health therefore means that people are able to have a satisfying and safe sex life and that they have the ability to have children and the freedom to decide when and how. Implicit in this last requirement is the right of men and women to be aware of how to obtain safe, effective, affordable and acceptable methods of their choice, as well as other methods of birth control, and the right to appropriate health care services that enable women to obtain Safe pregnancy and childbirth, and offers couples the best chance of having a healthy baby (Higher Population Council, 2009).

- Professional Family Planning

It is a civilized behavior by spouses to control when to start having children and their number, and the interval between one and the other, and when to stop having children, each according to his circumstances and abilities and with the consent of the spouses within the health framework that focuses on the health of the mother and child. Despite the relative increase in the



use of family planning methods, official statistics in recent decades indicate demographic shifts that have resulted in significant increases in population numbers, and changes in their social, economic and health characteristics (Alenezi & Haridi, 2021).

A woman's ability to choose whether and when to become pregnant directly affects her health and well-being. Voluntary family planning saves lives and accelerates sustainable human and economic development (Cleland, 2006). Family planning implies the ability of individuals and couples to anticipate and attain their desired number of children and the spacing and timing of their births (World Health Organization Regional Office for Europe , 2000). Use of contraception prevents pregnancy-related health risks for women and children. When births are separated by less than 2 years, the infant mortality rate is 45% higher than it is when births are 2–3 years and 60% higher than it is when births are four or more years apart (Kantorová, 2020). Family planning offers a range of potential non-health benefits that encompass expanded educational opportunities and empowerment for women and sustainable population growth and economic development for countries (World Health Organization, 2020). Family planning is achieved through contraception, defined as any means capable of preventing pregnancy, and through the treatment of involuntary infertility. The contraceptive effect can be obtained through temporary or permanent means. Temporary methods include periodic abstinence during the fertile period, coitus interruptus (withdrawal), using the naturally occurring periods of infertility (e.g., during breastfeeding and postpartum amenorrhea), through the use of reproductive hormones (e.g., oral pills and long-acting injections and implants), placement of a device in the uterus



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(e.g. ,copper-bearing and hormone-releasing intrauterine devices), and interposing a barrier that prevents the ascension of the sperm into the upper female genital tract (e.g., condoms, diaphragms, and spermicides). Permanent methods of contraception include male and female sterilization (World Health Organization, 2020); (Alenezi & Haridi, 2021)

Access to safe voluntary family planning is a human right, and family planning is central to achieving gender equality and empowering women, and is a key factor in poverty reduction. However, at least 222 million women globally who wish to use safe and effective family planning methods are unable to do so because they lack access to information, services, goods, or the support of their partners or communities. Most women with an unmet need for family planning live in 69 of the poorest countries on Earth (Sonfield, 2014).

UNFPA works to support family planning by: advocating for human rights-based family planning guides and policies; ensuring a steady and reliable supply of high-quality family planning; strengthening national health systems; Data collection and research funding to support this work. UNFPA also provides global leadership in advocating for improved access to family planning, by calling on partners including governments to develop evidence and policy, and by providing programmatic, technical and financial assistance to low- and middle-income countries (Family Planning Rights and Empowerment Working Group , 2014). The term family planning expresses the birth of children in an organized manner at spaced intervals, taking into account the social and economic conditions of the family. The concept of family planning expresses that each individual and each spouse has the right to freely and responsibly choose the number



and spacing of their children and to obtain information and education and the means to help achieve this (Alenezi & Haridi, 2021).

- The Awareness of Reproductive Health

One of the most controversial issues facing young people today is related to sexuality and reproductive health. Research shows that a high percentage of adolescents still value virginity, revealing their disapproval of premarital sex (De Jose, 2013). However, according to a study at a public university in the Philippines, students reported that they had an early sexual experience and a large number of them were unplanned (Labrague et al., 2012). On the contrary, awareness of the topical aspect of reproductive health was very high in four selected schools in Metro Manila (Ubalde et al., 2012). Furthermore, the critical components of reproductive health, which Ubalde et al. (2012) mentioned cover at least 10 major aspects. The researcher considered the first six as these aspects are the priority and stipulated in the law. A review of the literature has shown that some college students have already engaged in vaginal sex (Hoopes et al., 2016) and that awareness of contraception is high among them (Bankole & Onasote, 2016). However, based on the study of Pastuszak et al. (2016), it was revealed that participants lack knowledge of sexual and reproductive health and that they engage in risky sexual behavior. Contraceptive use is essentially a burden on its female counterpart. Most of the reviewed literature focused on women especially in the field of contraceptive awareness (Cao et al., 2015; Melaku et al., 2014; Mishra & Mukhopadhyay, 2012).



Furthermore, in terms of reproductive health information sources, Bankole & Onasote (2016) identified friends, television and magazines/newspapers, but the most preferred were physician's/health professionals (Sundstrom et al., 2015), parents (Melaku et al., 2014; Nwalo & Anasi, 2010) and university lectures/lecturers. Other sources include sexual health information online (Magee et al., 2012). When it comes to other reproductive health issues (Asio, 2019).

On the female side, Gollakota et al. (2015) that university students in a particular Indian region have limited knowledge of cancer screening. While in the concept of infectious diseases that can be transmitted (e.g., HIV/AIDS or sexually transmitted diseases), the relevant literature has indicated varying degrees of awareness in both males and females. Gollakota et al. (2015) stated that most girls (colleges) were aware of HIV infection and that their knowledge of symptoms and prevention of STDs was limited. Sundstrom et al., (2015) also ruled out that most participants had heard of the HPV (for HIV) vaccine and that the majority had received at least one shot of the vaccination.

Labrague et al. (2013) revealed that respondents in their study were found to have some misconceptions regarding HIV/AIDS and STIs. Whereas Rodriguez et al. (2015) also reported that men lack information on HIV prevention strategies and Magee et al. (2012), revealed that participants reported that fear of contracting an STD/HIV is a common motivator for Internet searches. Finally, with regard to predicting awareness towards reproductive health, a number has been observed by different research: De Jose (2013) recognized four factors - attitude towards sex, monthly



household income, gender and sexual preferences as important predictors of sexual behavior (Asio, 2019).

On the other hand, Ziemer and Hoffman (2012) identified women's self-efficacy, social environment and perceptions about vaccine predicted vaccine intentions and behaviors. Furthermore, age, media exposure, and economic status have emerged as significant associations of treatment-seeking practices (Mishra and Mukhopadhyay, 2012). In addition, the following are still considered the best predictors of reproductive health awareness: increased perceived interest and decreased racial pride (Bynum et al., 2011); knowledge of sexual health and positive attitudes towards sexual minorities (Chi et al., 2013); risk factors for male students having permissive attitudes towards premarital sexual activities, being less religious and a younger age group (Rahman et al., 2012); Exogenous incentives, the developmental process, internal control (Chang et al., 2014) and barriers to sex education were viewed from 5 aspects: feasibility, acceptance, accountability, strategies and a lack of community awareness (Khalaf et al., 2014).

- The Effect of Awareness Towards Reproductive Health on Family Planning

Access to safe and voluntary family planning is a fundamental human right. Family planning is central to gender equality and the empowerment of women and girls, and is a key factor in achieving demographic dividend and economic growth. UNFPA works to support family planning by facilitating a regular and reliable supply of high-quality contraceptives; Strengthening national health systems with regard to securing



commodities, advocating policies in support of family planning, and collecting data to support this work (Alenezi & Haridi, 2021). Achieving good reproductive health remains an elusive goal in many parts of the world. This lack of care has repercussions. An estimated 830 women die of pregnancy-related causes each day, amounting to more than 300,000 deaths each year; 99% of these deaths occur in low- and middle-income countries. Nevertheless, access to family planning can significantly reduce these mortality rates (Ahmed, 2012).

With limited resources available, family planning services are increasingly seen as one of the appropriate mechanisms for improving women's reproductive health. Medical research has proven that too early, too late and frequent pregnancies negatively affect a woman's health, and it also affects the health of a previously born child; many modern, safe methods of contraception can prevent anemia, sexually transmitted diseases, and some forms of benign and malignant tumors. An unwanted pregnancy is a serious threat to a woman's health, and even when abortion is legal, its potential side effects are responsible for a significant proportion of maternal mortality and morbidity; the incidence of induced abortion is inversely related to access to and availability of safe and effective contraceptives (Alenezi & Haridi, 2021).

Contraceptive prevalence rates range from about 60 to 70 percent in some Western European countries, to less than 10 percent in some Eastern European countries. Many countries lack the financial resources or political will to make the necessary changes. NGOs concerned with women's reproductive health are increasingly active in their countries for changes, and the increasing social respect for these organizations was



reflected in the fact that many women affiliated with family planning or other women's health organizations were members of national delegations attending the recent International Conference on Population and Development (ICPD) in Cairo in September 1994 which has a direct impact on the decision-making process regarding global women's health issues (World Health Organization Regional Office for Europe , 2000).

Reproductive health means the ability of people to have a responsible, fulfilling and safer sex life, to be able to have children and to be free to choose when and how to do so. It also includes that men and women know about safe, effective, affordable and acceptable birth control methods; As well as obtaining appropriate health care services for sexual and reproductive medicine, and implementing health education programs to ensure that having a safe pregnancy and childbirth provides couples with the best chance of having a healthy child (Hall, 2012).

Individuals may face disparities and inequalities in reproductive health services, and inequalities vary based on social and economic status, level of education, age, race, religion or the resources available in their environment, for example, low-income people may not have access to appropriate health services and education necessary to know what is appropriate to maintain on reproductive health (Hall, 2012).

Reproductive and sexual health represents 20 percent of the global burden of poor health for women and 14 percent for men, according to estimates by the World Health Organization in 2008. According to the United Nations Population Fund (UNFPA), unmet sexual and reproductive health needs deny women the right to make "crucial choices about their own body and future" that affect family well-being. Since women usually bear the



care of children, reproductive health cannot be separated from gender equality (World Health Organization, 2020).

Reproductive health should be viewed as a lifestyle approach as it affects both men and women from childhood to old age. According to the United Nations Population Fund, reproductive health at any age has a profound impact on an individual's later health [8], including challenges that people face at different times in their lives such as family planning, services that prevent sexually transmitted diseases, and early diagnosis treatment of reproductive health diseases; Therefore, necessary services such as health and education services should be strengthened, and the availability of basic health supplies such as contraceptives and medicines should be supported (Abu-Al-Hamayel., 2010).

Access to reproductive health services is very poor in many countries. Women are often unable to access maternal health services because they are unaware of the existence of these services or lack of freedom of movement, and some women are subjected to forced pregnancies and are prohibited from leaving the home. In many countries a woman is not allowed to leave the home without a male relative or husband; thus, their ability to access medical services is limited. There is therefore a need to increase women's autonomy in order to improve reproductive health (Abu Kamil, 2011). According to the World Health Organization "All women need access to care during pregnancy, care by professionals during childbirth, and care and support in the weeks after childbirth." (World Health Organization, 2020).

Although some reproductive health services are legally recognized; this is not enough to ensure that these services are actually available to people.



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The availability of contraceptives, sterility and abortion depends on laws as well as social, cultural and religious norms. Some countries have liberal laws on these issues, but in practice these services are very difficult to access due to unscrupulous doctors, pharmacists and other social and medical workers (Kirchgaessner, 2016).

Reproductive health is affected by several factors, including economic, social, cultural and environmental factors, including various variables such as the educational level of the spouses, their relationship to the work force, and the living conditions of their families. From here we can identify a group of factors affecting reproductive health (Abu-Al-Hamayel., 2010):

Empowering women by increasing educational opportunities for girls, especially in the countryside, which will reflect positively on the status of women in society, and expand their awareness and ability to make decisions related to their reproductive health. Wrong educational practices and behaviors related to gender, which are punctuated by many disparities, as the family spending on girls in terms of education, vocational training and health care issues may be less than that of males, and this leads to a lower health and psychological status of women, and their control over their sexuality and reproductive. Violence affects reproductive and sexual health, including all forms of physical, sexual and moral abuse. Customs, traditions and taboos related to sexuality constitute a major obstacle to the availability of information and the provision of reproductive health services (Abu Kamil, 2011).

The lack of human and financial resources, health systems and laws, in addition to the lack of awareness among the general public, is an obstacle to the activation of reproductive health programs. The Population and



Development conferences in Cairo and Beijing recognized the important role and awareness of reproductive health concepts and their impact on professional family planning in improving reproductive health, as the effective use of family planning methods, and even the conviction of the method chosen, is often subject to the influence of men. So their support contributes to the better use of female methods, and for many couples, male methods can be an excellent option. The positive contribution of men to the prevention of sexually transmitted diseases through the use of available means of prevention is also crucial (Asio, 2019).

Contrary to the common belief that men do not pay attention to reproductive health in all its dimensions, studies have indicated that when men know and learn about family planning methods, they want to use them, and the greater the burden of a large family, they desire fewer children (Higher Population Council, 2009). So it can be said that there are men who share the responsibilities of fatherhood, who stand against the use of violence against women, and who do not mind assuming their responsibilities. However, this requires a lot of effort at the level of the prevailing cultural patterns and established social structures in order to change them in a more just and equitable direction, through the gender approach, which refers to equality in the roles and responsibilities that society bears for men and women, roles that affect all aspects of life. Therefore, the mechanisms of activating the role of men in reproductive health appear in the following (Asio, 2019):

- Raising awareness among men to support women's choices for family planning methods. The most important reason for impeding



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the use of family planning methods is the opposition of some husbands to it.

- Increasing communication and dialogue between spouses, when reproductive health decisions are taken with the participation of the spouses, the chances of implementing those decisions usually increase, and men become more supportive of their wives and help them receive reproductive health services when needed.
- Increasing the use of family planning methods for men in order to reduce the burden of family planning on women at the present time.
- Improving the behavior of men in order to prevent sexually transmitted diseases, which make this clearer in the prevention and treatment of these diseases, and for prevention programs to become effective, both spouses must be educated and treated.
- Addressing the reproductive health needs of men so that access to these services is a human rights issue for both women and men. Men have their own reproductive health problems outside the scope of family planning services and sexually transmitted diseases such as infertility, sexual dysfunction, prostate cancer, testicular cancer, and lack of Having services that address these needs increases stress, tension and loss of self-esteem among men.
- Encouraging men to become more familiar with family-related issues such as raising children, promoting male and female education, reducing violence against women and children, as well as providing the necessary resources to cover family needs, all of which are complex and deeply rooted cultural issues.
- Overcoming prejudice, as the strategy of integrating men's and women's services needs many factors in order to succeed, including



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the service provider's knowledge of the personal values of both women and men with regard to gender issues, and how these values can lead to a bias towards men or women, This is done by putting forward a number of statements that each of them answers, such as: (a man is expected not to be present at the birth of his child) In some cultures men are prohibited from being present during childbirth, while in other places the presence of men is encouraged as a way to increase parental appreciation for this the event is significant, as it may be asked whether a woman's use of family planning methods without her husband's knowledge is a breach of trust between them. This in turn reflects a broad range of personal values and culture shaped by cultural, educational, and professional experiences that are clearly influenced by a person's gender (Alenezi & Haridi, 2021).

In a study conducted in southern India, it was shown that the inappropriate and inappropriate behavior that respondents sought could be explained by their lack of proper awareness about STDs. It has been observed that the level of awareness about STDs is very limited among adolescents (Santhya, 2002). Adolescent pregnancy and childbirth have significant implications for the health of the mother and child. Among adolescent girls under the age of 18, the maternal mortality rate is three to four times higher than among older women. The risk of early childbearing to the health of the mother and child increases among married adolescents. In many Asian countries, sexual activity and procreation begin with marriage, and data on procreation is usually collected from married women (UNSAIDS, 2001).

Compared to pregnancy at a later age, pregnancy during adolescence increases a woman's reproductive health risks. It has also been found that



women who begin having children at a younger age are more likely to have more children at a younger age. Such successive childbearing in the short term negatively affects the health of the woman. Information on the prevalence of reproductive health is scarce in developing countries such as India. Some community studies conducted in India on gynecological morbidity have shown that there is a high prevalence of reproductive health problems (Bang and Bang, 1989; Bhatia and Cleland, 1995; IIPS 2000).

These studies examined the relationship between socioeconomic characteristics and the prevalence of reproductive health problems. Some previous studies examined the relationship between a woman's current age and reproductive health problems, but the relationship between age at birth and the prevalence of reproductive health problems remains neglected, an important component of reproductive health problems. A study was conducted by Duncan et al., 1994 to find out the relationship between teenage pregnancy and the prevalence of reproductive health problems in the African city. The study found that the prevalence of sexually transmitted diseases was observed to be higher among teens compared to women in the older age group. Some of their previous studies focused on hospital records. It has been found that there is a high prevalence of genitourinary infection and sexual health problem in India.

The negative impact of age at first birth is possible because the age group 15-19 years is the age of physical puberty for girls. During these ages, the body undergoes rapid physiological growth; emotional development, and sexual maturation (Mehta et al., 1999) In India, empirical evidence demonstrates the integration of a family planning program that ultimately improves the health of the mother and her child. Prenatal care services, a



major component of a maternal and child health program, are said to have a beneficial effect on family planning, especially among younger women, and the gender disparity is largely explained by poor reproductive health and high adolescent maternal mortality.

Fifteen percent of all deaths of rural women aged 15-24 are attributable to obstetric and pregnancy complications, the second largest cause of death at this age after accidents and violence (Jejeebhoy, 2000). Knowledge of sex and reproduction is also limited among educated and uneducated adolescents. Very few rural adolescent girls can describe how body changes relate to sexual intercourse and reproduction (Vlassof, 1987). A large percentage of teenage girls had incorrect knowledge or misconceptions about the fertile period, reproduction, sexually transmitted diseases, and HIV/AIDS. Age, education of adolescents or their mothers, residence, and exposure to media were important predictors of adolescent girls' knowledge of reproductive health. Strong efforts are needed to improve awareness and clarify misconceptions about reproductive health. Improving access to media and education can improve the awareness of rural adolescent girls in Bangladesh about reproductive health (Uddin and Choudhury, 2008).

Conclusion

Providing information to decision makers and program implementers falls within the tasks of the Higher Population Council in order to be used by policy makers and program implementers to increase the impact on the level of decisions and programs implemented in this field. We hope that the results and recommendations of this research will contribute to identifying the most important challenges that hinder achieving the goal of



reproductive health/family planning programs, as well as identifying the most important needs that must be met, especially that the research focused on awareness of reproductive health concepts and their impact on professional family planning. This research will be one of the important references for the coming years upon completion of the implementation of the National Reproductive Health/Family Planning Plan in cooperation and coordination with all sectors providing reproductive health/family planning services. The lack of family planning services in primary health care centers hinders access to professional advice. It is essential to consider family planning clinics to provide quality family planning services.

Through previous studies it is clear that many people are aware and aware of various reproductive health issues such as family planning, abortion, management of post-abortion complications, maternal and child health, breastfeeding, adolescent and youth health, and infection prevention. People's information from sources such as socioeconomic conditions, the status of women, social and gender issues, culture, and psychosocial issues related to reproductive health were considered "important", and were all found to be significantly related to respondents' level of awareness of reproductive health issues. Finally, educators, health practitioners and the like need to work hand in hand to disseminate important truths in a timely and religious way, so as to guide the youth of the next generation. Based on this research conducted and the conclusions reached, the researcher recommends that the school and educational bodies do the following:

1. Raising awareness about family planning
2. Establish a reproductive health program that would help create a more intense information campaign where sources of information



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- are shown to be important and, if possible, to integrate reproductive health into the school curricula.
3. Hold a separate workshop for teachers/educators in terms of teaching or facilitating reproductive health awareness.
 4. Improving parent-student communication through targeted family life education activities between students and parents.
 5. To make school nurses proactive in disseminating information, especially about awareness in the field of family planning, prevention and management of reproductive tract infections (reproductive tract infections), HIV/AIDS and sexually transmitted diseases.
 6. It is highly recommended that follow-up research be undertaken with other variables included such as adolescent sexual behavior and the remaining six aspects or components of reproductive health as stipulated in the Reproductive Health Act.



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