

## Knowledge about sexual and reproductive health among undergraduate students in Sri Lanka

*Dissanayake Ralalage Nayomi Kaushalya Kumari Dissanayake*

*Rajarata University, Sri Lanka*

### Abstract

Sexual and reproductive health are often a sensitive topic. In many places round the world it's taboo to talk openly about sex. this will make it difficult to access information and services around sexual and reproductive health, especially in places where religious or cultural beliefs restrict access to contraception or abortion. Good sexual and reproductive health means having a secure and fulfilling sex life, with the liberty to make a decision whether or not you would like to breed, and at what time in your life. Access to clear advice and knowledge on sexual health is crucial, as is having the ability to settle on from a variety of contraceptive options, without facing any stigma or discrimination. it's also important to possess access to maternal health services during pregnancy and childbirth, to make sure a secure pregnancy for both mother and child. for several women, a scarcity of access to those birth control services means they're unable to settle on once they have children, and the way many children they need. it's often the poorest who cannot access these services, and thus this lack of designing can have an enormous financial impact on women and their families. this will impact on their health, also because the health of their family. Consequences are often wide-ranging, from child malnutrition to the lack to send all children to high school. a scarcity of sexual and reproductive health services also can cause the spread of sexually transmitted diseases, like HIV. This directly impacts on the health, well-being and livelihoods of families, and may be particularly dangerous if those with the disease haven't been ready to access health services to diagnose or treat their illness.

Sexual and reproductive health pertains to the state of physical, mental, and social well-being altogether matters associated with the genital system. Good SRH implies that folks can have a satisfying and sexual activity life, the potential to breed, and therefore the freedom to make a decision Investments in SRH are critical to securing healthy livelihoods and counteracting the role of harmful gendered social norms. The practice of monitoring and evaluating SRH is ever-evolving, with the emergence of latest technical areas, like male engagement in reproductive health, and enhancements within the measurement of long-established priority areas. Sexual and reproductive health and rights or SRHR is that the concept of human rights applied to sexuality and reproduction. it's a mixture of 4 fields that in some contexts are more or less distinct from one another, but less so or not in the least in other contexts.

These four fields are sexual health, sexual rights, reproductive health and reproductive rights. Within the concept of SRHR, these four fields are treated as separate but inherently intertwined. Distinctions between these four fields aren't always made. Sexual health and reproductive health are sometimes treated as synonymous to every other, as are sexual rights and reproductive rights. In some cases, sexual rights are included within the term sexual health, or the other way around. Not only do different non-governmental organizations (NGOs) and governments organizations use different terminologies, but different terminologies are often used within an equivalent organization.

Good sexual and reproductive health is vital for women's general health and wellbeing. it's central to their ability to form choices and decisions about their lives, including when, or whether, to think about having children. Sexual and reproductive health isn't only about physical wellbeing – it includes the proper to healthy and respectful relationships, health services that are inclusive, safe and appropriate, access to accurate information, effective and affordable methods of contraception and access to timely support and services in reference to unplanned pregnancy. Different life stages are related to specific women's sexual and reproductive health issues, including menstruation, fertility, cervical screening, contraception, pregnancy, sexually transmissible infections, chronic health problems (such as endometriosis and polycystic ovary syndrome) and menopause.

Sexual and reproductive health (SRH) is an integral component of the health of all citizenry. SRH problems may cause enormous health social and economic burden in national and global levels. A descriptive cross-sectional study was conducted on 655 undergraduates from state universities in Sri Lanka. A structured online questionnaire was used because the data tool of this study. The questionnaire was developed with use of Google form software and pre tested. Socio-demographic information and knowledge, on sexual and reproductive health among university students were assessed. Statistical Package for the Social Sciences (SPSS) version 16 was the tool which used for analyzing data. it had been noted that overall knowledge on SRH in reference to reproductive physiology, contraception and STIs was significantly higher among male participants than females. Majority of undergraduates (80.3%) knew about the utilization

of condoms. Although majority of female students have heard about condoms, they poorly awarded about use of condoms and there's a big association between gender and knowledge about use of condoms ( $p < 0.001$ ). HIV/AIDS was recognized as a STI by 98.7% of undergraduates in the sample. Females showed poor ability in recognizing symptoms of STI comparing to males ( $OR = 0.30$  95% CI 0.14 0.66). This highlight the female students should have better knowledge on sexual and reproductive health including sexual abuse and consenting for sex. Necessary measures should be taken to improve knowledge related to sexual and reproductive health among university students.

Gynecology Congress 2020, 7<sup>th</sup> Asia Pacific Gynecology and Obstetrics Congress; June 11-12, 2020

Sexual and reproductive health and rights for all cannot be realized just by delivering more services. Access to services by women, young people and marginalized groups is adversely affected by poverty, stigma and discrimination – barriers to achieving sexual and reproductive health and well-being. Rutgers researches these barriers and develops and tests new approaches. All women should have access to contraception and the support of sexual and reproductive health care services. They might be denied this because they live too remotely, they have unsupportive husbands, or because they are unmarried or too young to be seen as legitimately sexually active. Sexual and reproductive health and rights (SRHR) are essential for sustainable development because of their links to gender equality and women's wellbeing, their impact on maternal, newborn, child, and adolescent health, and their roles in shaping future economic development and environmental sustainability. Yet progress towards fulfilling SRHR for all has been stymied because of weak political commitment, inadequate resources, persistent discrimination against women and girls, and an unwillingness to address issues related to sexuality openly and comprehensively. As a result, almost all of the 4.3 billion people of reproductive age worldwide will have inadequate sexual and reproductive health services over the course of their lives.

***Biography:***

D. R. N. K. K. Dissanayake is a Lecturer at the Department of Health Promotion, Faculty of Applied Sciences, Rajarata University, Sri Lanka. She has followed the Masters of Public Health in Epidemiology in Faculty of Medicine, University of Kelaniya. While higher studies public health research is interested.

[7<sup>th</sup> Asia Pacific Gynecology and Obstetrics Congress;](#)  
June 11-12, 2020.

**Abstract Citation:**

R. N. K. K. Dissanayake, Knowledge about sexual and reproductive health among undergraduate students in Sri Lanka,