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KNOWLEDGE AND UTILIZATION OF YOUTH FRIENDLY SERVICES AMONG ADOLESCENTS IN SELECTED SECONDARY SCHOOLS IN AKURE, NIGERIA

ELEMILE, M. G.; OLADAPO M. M.; OJO I. C.; OGUNMUYIWA O. E.; OKHOMINA F. O.

ABSTRACT

The improvement of adolescent sexual reproductive health has become a global concern. Even though there are Youth Friendly Services (YFS) in Nigeria, young people have little or no knowledge about them. In order to bridge the gap, this study examine the level of knowledge and utilization of youth-friendly services among adolescents of selected secondary schools in Akure South Local Government, Ondo State. A descriptive survey research design was adopted. Cochran formula was used to determine sample size while stratified random sampling was used to select 276, 128, and 90 respondents from Omolurogbo Grammar School Akure (OGSA), Saint Peter's Unity Secondary School Akure (SPUSSA), and, Palm Rock Secondary School, Akure (PRSSA) respectively in Akure South Local Government Area. A validated questionnaire with a dichotomous scale was used to collect knowledge data from the respondents. The data collected were analyzed using descriptive statistics including chi-square [χ^2] to test the relation between the knowledge and utilization of youth-friendly services. The level of significance was set at 5% [0.05] such that significant associations were established when $p < 0.05$. Results of this study reveal that that majority of the respondents (87%) are not knowledgeable about youth-friendly clinics and services while 87.5% have poor level of utilization. We further observes that the major factor-affecting uptake of youth-friendly services in Akure are lack of awareness of the services (75.5%) and lack of knowledge of what services are rendered at the center (77%). The findings of the hypothesis tested showed that there is a significant relationship between the knowledge of youth-friendly services and its' utilization by the students ($P=0.633$). In conclusion, it is essential to increase the level of knowledge and utilization of services rendered in all the youth-friendly centers.

Keywords: Youth-friendly services; utilization; knowledge; adolescents

INTRODUCTION

Youth-friendly service is a strategy developed by WHO to meet the unique needs of the youth, for optimal utilization of the services with wider accessibility is required to prevent adolescents from adopting life-threatening behaviours that result in poor sexual reproductive health-related outcomes. Freng *et al.*, (2020) observe that Youth-friendly service involves counselling young men about the importance of mutual respect for the decision of their female counterparts and their shared responsibility toward Reproductive Health (RH) Young people including adolescents are highly vulnerable to reproductive health problems, which can be tackled through the promotion of access to information (Okosun, 2017; Oyira *et al.*, 2019). It has been reported that globally in 2016, 2.1 millions of people aged between 10, and 19 years are living with HIV, and 260,000 become newly infected with the virus. In sub-Saharan Africa, adolescents face many significant Sexual Reproductive Health challenges such as limited access to youth-friendly services (YFS) including information on growth, unsafe abortion, gender-based violence, sexuality, and family planning (FP) (Ninsiima *et al.*, 2021). This has led youth into risky sexual behavior resulting in high STI and HIV prevalence among young people, early pregnancy, and vulnerability to delivery complication resulting in high rates of death and disability Kim *et al.*, (2019).

Adolescence serves as a period of personal development where a young individual acquires the necessary skills and knowledge needed in any circumstances to prepare for the next stage of life (WHO 2014). WHO, (2015) reveals that changes that occur during

adolescence are speedy and comprise both individual and environmental influences which shape the lives of the adolescent. It has been noted that Nigeria has the highest rate of adolescent fertility and according to estimates, over 900,000 births to adolescents occur annually and 150 out of every 1000 women who give birth in Nigeria are 19 years old or under (Izugbara, 2015). About 760 thousand cases of abortion occur annually, and one-third of Nigerian women who obtained abortions each year are young people. Furthermore, 80% of patients in Nigerian hospitals with abortion-related complications are young girls (Okosun 2017; Uzoma, 2017).

A common feature of young people in Nigeria is their potential vulnerability to HIV and other STIs, teenage pregnancy, unsafe abortion and its actual consequences, and sexual violence including rape (Shayo & Kalomo, 2019). Young people are vulnerable to these challenges because of their predisposition to peer pressure, eagerness to experiment with sex, low-risk perception, unprotected sex, and alcohol and drug abuse (Okosun 2017). Existing studies have also identified barriers to accessing youth-friendly health services. Aninanya et al., (2015) opine that some of these barriers are unfavourable national regulations that prevent access to care concerning demographics including age and marital status and further, reveal that adolescents are not able to access health care services due to the cost of services and poor service provider attitudes. Anokye-Mensah (2019) submits that other barriers are inconvenient hours of operation as well as high cost of services and ease of transportation, poor understanding of adolescent developmental needs, and lack of awareness of where and how to get help.

In 2015, the Ondo State Government developed the State Strategic Framework for the Integration of Adolescent and Youth Friendly Health Services into Secondary Health Facilities in the state. This was prompted because the result of the 2012 maternal mortality study in Ondo State shows that 46% of maternal deaths during pregnancy in the state are due to abortion. This is

seen to be more common amongst young people. Improving the sexual and reproductive health of adolescents and youths has become a challenge to countries around the world (Anokye-Mensah, 2019). These challenges are due to vulnerability to peer pressures, experimentation with sex, and possession of sexual partners, low-risk perception, unprotected sex, alcohol, and other risky lifestyles (Thomé 2019; Okosun, 2017). Furthermore, young people encounter difficulties in assessing reproductive health services due to unfriendly, unaffordable, inconvenient timing, judgmental and non-confidential services which result in poor sexual and reproductive health services among young people (Mazur, 2018). Also, young people tend to lack the knowledge and skills on reproductive health and access to health services that are cheap and before their health and besides are unable to talk about reproductive health issues with their parents (Swan *et al.*, 2021). Existing studies reveals that similar study has been carried out on youth-friendly services in other parts of the world, however, to the best of our knowledge, very little has been done in this direction, most especially, as regards Ondo State, Nigeria. This study, therefore, investigates the knowledge and utilization of youth-friendly services among adolescents of selected secondary schools in Akure South Local Government, Ondo State.

METHODOLOGY

A descriptive research design was adopted. The study was conducted in three secondary schools in Akure South Local Government, namely Omolurogbo Grammar School, Akure (OGSA), St. Peter's Unity Secondary School Akure (SPUSSA), and, Palm Rock Secondary School, Akure (PRSSA). The secondary schools consist of both male and female students. The total population of the students in the schools is 1622. These consist of 904, 418, and 300 for OGSA, SPUSSA, and PRSSA respectively. The Sample size was determined using Cochran Formula. Considering 5% as the attrition rate, the total sample size would be $23+471=494$. Stratified

random sampling was used to select 276, 128, and 90 from OGSA, SPUSSA, and PRSSA respectively. The secondary schools were selected because YFS clinics had been established there and the students were

expected to have been patronizing the clinic. The selection was adopted through stratified random sampling.

Table 1 shows the distribution of students in the selected secondary schools.

Table 1: Population of Secondary Students from the three-selected secondary school

School	Male Students	Female Students	Total
	N (%)	N (%)	N (%)
OGSA	148 (29.9)	128 (25.9)	276 (55.8)
SPUSSA	86 (17.4)	42 (8.5)	128 (25.9)
PRSSA	54 (10.9)	36 (7.3)	90 (18.2)
Total	288 (58.2)	206 (41.5)	494 (100)

A self-developed structured questionnaire which consists of four sections namely, (A). Socio-demographic data of respondents, (B). Knowledge of youth-friendly services, (C). Use of youth-friendly services by the adolescents and (D). Factors influencing the utilization of youth-friendly services. Six questions (questions 9, 10, 11, 12, 13, and 14) are used to assess the respondents' knowledge. Minimum and maximum scores are calculated as 0 and 18. The scores are converted to percentages and graded as follows; scores below 50% are graded as having poor knowledge, while those with 50.0% and above are regarded as having good knowledge.

The instruments are given to an expert for face validation and 20 copies of the questionnaire are

administered to students outside the state for reliability tests and calculation is determined using internal consistency and reliability with a Cronbach's value of 0.799. The data collected are analyzed using descriptive statistics. Inferential statistics such as chi-square [X^2] are used to test the relation between the knowledge and utilization of youth-friendly services. The level of significance as set at 5% [0.05] such that significant associations are established when $p < 0.05$.

Ethical clearance is obtained from the ethical review committee of the University of Medical Sciences, Ondo. Approval and permission are also obtained from the principals of the selected Secondary Schools.

RESULTS

Table 2 reveals the socio-demographic characteristics of the respondents. Majority of the students 71.5% are between the ages of 15 and 17 years, 27.5% are between the ages of 18 and 20, while only 1% are between the ages of 10 and 13 years. Even the gender of the students shows that the majority 316 (64%) are males while 175 (36%) are females. In addition, majority 440 (89%) of the students are Christians while 54 (11%) are Muslims. Furthermore, majority 276 (55.8%) are students at Omooluorogbo Grammar School, 128 (25.9%) are students of St Peter's Unity

Secondary School, while 90 (18.2%) are students of Palmrock International School. All of the students are students in the Senior Secondary School class (SSS 1-3), same with the Nationality that reveals that all the students are Nigerians. Also, almost all 462 (93.5%) of the students are from the Yoruba tribe, 25 (5%) are Igbos and 7 (1.5%) are from the Edo tribe. Finally, almost all 395 (80%) of the students are from Ondo State, while 20% are from other states like Kwara state (1%), Lagos State (1%), Ogun State (2%), Akwa Ibom State (1%), Ekiti State (6.5%), Edo State (2%), Osun State (3.5%), and Cross Rivers State (3%).

Table 2: Socio-Demographic Characteristics of Respondents

S/N	Variable	Description	Frequency (N=494)	Percentage (%)
1	Age	10-13 Years	04	1.0
		15-17 Years	353	71.5
		18-20 Years		
2	Gender	Male	316	64.0
		Female	178	36.0
3	Religion	Christian	440	89.0
		Muslim	54	11.0
4	Name of school	Omooluorogbo Grammar School	276	55.8
		St Peter's Unity Secondary School	128	25.9
		Palmrock International School	90	18.2
5	Class	SSS 1-3	494	100.0
6	Ethnic group	Yoruba	462	93.5
		Igbo	25	5.0
		Edo	07	1.5
7	Nationality	Nigerian	494	100.0
8	State of Origin	Ondo State	395	80.0
		Cross River state	15	3.0
		Osun State	17	3.5
		Edo State	10	2.0
		Ekiti State	32	6.5
		Akwa Ibom State	05	1.0
		Kwara State	05	1.0
		Ogun State	10	2.0
		Lagos	05	1.0

Knowledge about the Youth-friendly services by Adolescents.

Table 3 shows the knowledge of youth-friendly services among adolescents. The majority 182 (62%) of the students have not heard about Youth-friendly services, and only 112(38%) have heard about it before; of the 38% who have heard about it before, 23% heard it from school, 8.5% heard it in Church, while 6.5% heard it on social media. In addition, only 68 (34%) know what a youth-friendly service is, whereas majority 194 (66%) did not know what a youth-friendly service is. Even 260(88.5%) have never visited a youth-friendly clinic

before, while just 34 (11.5%) have visited a youth-friendly clinic before. The majority 221(75%) are not aware of the services rendered in youth-friendly clinics. Seventy-four (25%) know about the services rendered in a youth-friendly clinic. Out of the 25% who know about the services rendered in a youth-friendly clinic, 17.5% mentioned that the youth-friendly clinic renders reproductive health services, while 7.5% mentioned that the clinic offers services related to drug use and drug abuse. This study indicates that majority of the respondents (87%) are not knowledgeable about youth-friendly clinics and services.

Table 3: Knowledge of Youth Friendly Services among Adolescents

S/N	Variable	Description	Frequency (N=494)	Percentage (%)
1	Have you heard about Youth Friendly Services	Yes	188	38.0
		No	306	62.0
2	Do you know what a youth friendly clinic/service is?	Yes	168	34.0
		No	326	66.0
3	Have you visited a youth friendly clinic	Yes	57	11.5
		No	437	88.5
4	Where did you hear about the youth-friendly clinic	School	114	23.0
		Church	42	8.5
		Social Media	32	6.5
		Not Applicable	306	62.0
5	Do you know about the services rendered in the youth -friendly clinic	Yes	124	25.0
		No	371	75.0
6	If yes, list some	Drug	37	7.5
		Reproductive Health	86	17.5
		Not Applicable	371	75.0

Table 3b shows the respondents' knowledge of youth-friendly services, after the grouping, the majority 87% of the students have poor

knowledge of adolescent-friendly services whereas 13% of the respondents have good knowledge of adolescent-friendly services.

Table 3b: Respondent’s Knowledge of Youth Friendly Services

Respondent’s Knowledge	Frequency	Percentage
Poor level of Knowledge	430	87.0
High level of Knowledge	64	13.0
Total	494	100

Level of Utilization of Youth Friendly Services

Table 4 is a presentation of the utilization of youth-friendly services. The majority 358 (72.5%) do not have any YFC close to them, whereas only 136(27.5%) have YFC close to them. The majority 259(52.5%) have never visited a YFC before, 153(31%) have visited the YFC 1 – 3 times, while only 82(16.5%) have visited YFC 4 – 6 times. Additionally, of the 47.5% who have visited a YFC before, 86(17.5%) visited for sexual issues, 69(14%) visited for drug addiction, and 80 (16%) visit for counseling. Also, only 188(38%) of the students like the attitude of the healthcare providers at the YFC, while 306(62%) do not like the attitude of healthcare providers at YFC when they visit. Those who like the attitude of healthcare workers mention various reasons for liking the healthcare workers like the way the people are attended to (11%), the way they smile (12.5%), and the fact that they are very nice (14.5%). On the other hand, those who did not like the attitude of healthcare providers at the YFC mention the following reasons: no skilled services provider (38%) and the fact that they are judgmental (34%).

Furthermore, 272 (55%) of the students reveal that they would consider visiting a youth-

friendly clinic, whereas 222 (45%) are not considering visiting a youth-friendly clinic, while those who would visit the youth-friendly clinic mention the following reasons for them visiting: To solve challenges for youths (6.5%), health education for youths (9.5%), to know about the services (34.5%) and for fun (4.5%). On the other hand, those who would not visit mentioned that they would not visit because of the long-distance (25.5%) and because they are not interested at all in YFS (19.5%). Also, only 138 (28%) have encountered challenges at the YFC, while the majority 356(72%) have never encountered any challenge at the YFC; areas, where the challenges are encountered, include health providers (5.5%), cost (6%), accessibility (7.5%) and services rendered (9%). Finally, majority 316(64%) of the students think youth-friendly service is important, while 178(36%) do not think that youth-friendly service is important. This study implies that the level of utilization of youth-friendly services is poor (12.5%). Table 4b shows the level of utilization of the youth-friendly services among the respondents. This study revealed that 432 (87.5%) have poor level of utilization and only 62(12.5%) level of utilization about the services is high.

Table 4: Level of Utilization of Youth Friendly Services

S/N	Variable	Description	Frequency (N=494)	Percentage (%)
1	Is any YFC close to you?	Yes	136	27.5
		No	358	72.5
2	How many times have you visited a youth-friendly clinic	Never	259	52.5
		1-3 times	153	31.0
		4-6 times	82	
3	What were your reasons for visiting	Drug addiction	69	14.0
		Sexual issues	86	17.5
		Counseling	80	16.0
		Not Applicable	259	52.5
4	Did you like the attitude of health care providers at YFC when you visited	Yes	188	38.0
		No	306	62.0
5	If yes, why?	The way people are attended to	54	11.0
		The way they smile	62	12.5
		They are nice	72	14.5
6	If not, why?	No skilled services provider	168	34.0
		They are judgmental	138	28.0
7	Would you consider visiting a youth-friendly clinic, if you haven't visited one?	Yes	272	55.0
		No	222	45.0
8	If yes, why?	Solve challenges for youths	32	6.5
		Health education for youths	47	9.5
		To know about the services	170	34.5
		For fun	22	4.5
9	If not, why?	Long-distance	126	25.5
		Not interested	96	19.5
10	Have you encountered any challenges at the YFC?	Yes	138	28.0
		No	356	72.0
11	If yes, which area did you experience the challenge in?	Health provider	27	5.5
		Cost	30	6.0
		Accessibility	37	7.5
		Services rendered	44	9.0
12	Do you think YFS is important?	Yes	316	64.0
		No	178	36.0

Table: 4b: Level of Utilization of youth-friendly services

Category of Utilization	Frequency	Percentage
Poor Utilization	432	87.5
High level of Utilization	62	12.5
Total	494	100

Factors Influencing uptake of youth-friendly service

Table 5 shows the factors influencing the uptake of adolescent-friendly services as indicated by the students. The factors include: a lack of awareness about the services (75.5%), lack of knowledge of what services are rendered at the center (77%), long time of waiting to be attended to at the center (66.5%), an unfriendly attitude of service providers towards adolescents (59.5%), judgmental attitudes of services (54%), lack of

confidentiality of service providers (52.5%), students are asked embarrassing questions by the service providers (53.5%), lack of skilled service providers (51%), location of the center not easily accessible (59.5%), lack of contraceptive services (51.5%), and the centers do not usually open at a convenient time (60%). We observe that lack of awareness about the services (75.5%) and lack of knowledge of what services are rendered at the center (77%) are the factors influencing uptake of youth-friendly services.

Table 5: Factors influencing uptake of youth-friendly service

S/N	Variable	Description	Frequency (n=494)	Percentage (%)
1	Lack of awareness about the services	Yes	373	75.5*
		No	121	24.5
2	Lack of knowledge of what services are rendered at the center	Yes	380	77.0*
		No	114	23.0
3	A long time of waiting to be attended to at the center	Yes	329	66.5
		No	165	33.5
4	An unfriendly attitude of service providers towards adolescents	Yes	294	59.5
		No	200	40.5
5	Judgmental attitudes of service providers	Yes	267	54.0
		No	227	46.0
6	Lack of confidentiality of service providers	Yes	259	52.5
		No	235	47.5
7	Students are asked embarrassing questions by providers	Yes	264	53.5
		No	230	46.5
8	Lack of skilled service providers	Yes	252	51.0
		No	242	49.0
9	The location of the center is not easily accessible	Yes	294	59.5
		No	200	40.5
10	Lack of contraceptive services	Yes	254	51.5
		No	240	48.5
11	The centers are not open at a convenient time	Yes	296	60
		No	198	40

*Scoring of 70 and above are significant

Relationship between knowledge and utilization of youth-friendly services

Table 6 shows the relationship between the knowledge of youth-friendly services and the utilization of youth-friendly services by the students. From this table, the Chi-Square is

0.227, the degree of freedom is 1, and the p-value is greater than 0.05 (P=0.633), hence the null hypothesis is rejected which means that there is a significant relationship between the knowledge of youth-friendly services and the utilization of youth-friendly services by the students.

Table 6: Relationship between the knowledge of youth-friendly services and the utilization of youth-friendly services by the students

Knowledge of youth-friendly service	Utilization of youth-friendly service		Total	Chi-Square	DF	P-value
	Poor Utilization	Good Utilization				
Poor Knowledge	378	52	430	0.227	1	0.633
Good Knowledge	54	10	64			
Total	432	62	494			

Discussion of findings

This study determines the knowledge and utilization of youth friendly services among adolescents in selected secondary schools in Akure, Nigeria. The findings from this study reveals that about two-thirds 71.5% of the students are between the ages of 15 and 17 years. Additionally, the majority 64% of the students happen to be males, while very few 36% are females. Furthermore, almost 93.5% of the respondents in this study are Yoruba. Majority, 89% of the students are Christians, which is expected since the study is conducted in the South western region of the country where Yoruba is the predominant tribe and Christianity is the dominating religion. In addition, all the students Nigerians, and all of them are in Senior Secondary School classes (SSS1-3). However, majority 80% of the students are indigenes of Ondo State, while a few others are from other different states, majorly the South-Western State, this is also expected because this study is conducted in the South western part of the country.

We further observe that the respondents are not knowledgeable about youth-friendly clinics and services. This is found to be different from the findings of Motunma *et al.* (2021) where it is discovered that students have a high level of

knowledge of 72.4% of youth-friendly services. Additionally, the study carried out by Ofurum and Gabriel-Job (2021) on the assessment of awareness and utilization of youth-friendly services among undergraduates at Rivers State University. This study reveals that the level of utilization of youth-friendly services is poor. Almost similar to this finding is the report made by Napit *et al.*, (2020) who also observe that only 24.7% of their respondents have utilized the adolescent-friendly service. Even Simeon *et al.*, (2020) and Simegn *et al.*, (2020) also report that the overall utilization of adolescent-friendly services by their respondents is as low as 28.8% in Debre, Tabor Town of Ethiopia. Even in Nigeria, a study carried out by Femi-Adebayo *et al.*, (2017) report that 34.6% of their participants utilize youth-friendly facilities and services.

The writers penned that it is obvious that the knowledge exhibited among adolescents is very poor which eventually influenced the utilization of youth-friendly services. This is confirmed by the testing of the hypothesis for the relationship between knowledge and utilization of youth-friendly services among adolescents. Findings from this study also reveal the major factor-affecting uptake of youth-friendly services in Akure as lack of awareness of the services and lack of

knowledge of what services are rendered at the center. This study is in line with Ajike and Mbegbu (2016) who reported that lack of knowledge and lack of awareness as the major factors contributing to the low level of utilization of youth-friendly services among adolescents.

This study also reveal that there is a significant relationship between the knowledge of youth-friendly services and the utilization by the students. This confirm the findings of Femi-Adebayo *et al.* (2017) who reveal in their study that the knowledge of youth-friendly services have significant relationship with the utilization of youth-friendly service,

CONCLUSION

The objective of the study is to investigate the relationship between the knowledge and utilization of youth-friendly centers among adolescents in Akure, Ondo State. It is obvious from the study that adolescents have poor knowledge of youth-friendly centers as well as a poor level of utilization of these centers. This can be attributed to the little or no awareness of adolescent-friendly services among adolescents, as many do not even know that they exist. Additionally, there are factors affecting the utilization of adolescent-friendly services identified in this study, some negative and some positive, of which the negative factors are more than the positive factors, hence the low level of utilization of these centers. It is essentially important to increase the level of awareness of youth centers among adolescents to increase their level of utilization of the services rendered in those centers.

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