

Adolescents' Perspectives Towards Using Social Networking and Internet to Gain Information about Reproductive and Sexual Health in Jordan: A Qualitative - Community based Study

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Abstract

Background: Prevention of reproductive health problems in adolescents to enhance health outcomes through increasing awareness and knowledge has become a priority.

Method: A community based qualitative study was conducted to explore Jordanian adolescents' perspectives on using Internet and social media to learn about reproductive and sexual health

Results: Adolescents indicated that they often access social media and the internet to find information regarding reproductive and sexual health. They explained that these resources were easier, faster and available through smart phones.

Conclusions: It is crucial to initiate a culturally sensitive website to meet the adolescents' needs to gain accurate and reliable reproductive and sexual health information, through collaboration between reproductive health experts and local government decision makers, community health nurses, and school teachers.

Keywords: *Community based study, Reproductive and Sexual health; adolescents; Jordan.*

Introduction

It is evident by research from the Arab world that adolescents spend long hours invading websites and chatting^{1,2,3,4}. However, using the internet and social networking by adolescents may have positive or negative outcomes on their health. Unfortunately, some information gained from the internet and social media is prone to be incorrect.

Adolescents use the internet and social media for a variety of reasons, most popularly for chatting, building virtual friendships, and playing games⁵, seeking information for academic and / or health information purposes⁶. In Jordan, adolescents spend a great deal of time surfing the internet³. Adolescents' use of the internet for gaming and chatting, rather than for seeking information was found to be associated with negative effects (ie Internet addiction)³

Using social media and the internet can contribute to enhancing self-esteem among young people as these networks have given them a safe space to talk with others about their lives, while preserving their identity and dignity⁷. In contrast, other researchers reported

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that the escalating use of these sites has contributed to the vulnerability of young people, social isolation, depression, and bullying^{8,9}.

Despite the negative consequences of the internet on adolescents, it can be beneficial in disseminating information about sensitive topics such as reproductive and sexual health (RSH). Findings of a study conducted in USA revealed that 49% of the adolescents had used the internet to gain health information on topics such as sexually transmitted diseases and sexual behaviors, the authors concluded that the internet is an accessible and trustworthy tool for adolescents to learn about sensitive health information¹⁰.

In Jordan, adolescents are the largest segment of society^{11,12}. It has been found that Jordanian adolescents do not know where to get such information because they believe reproductive clinics are reserved for married women and mothers¹³. Young persons who try to find RSH information from non-health care professionals may find that they are not receiving accurate information¹⁴ and this lack of RSH information may put them at risk of pregnancy, abortion, sexually transmitted infections (STI).

Study Objectives:

- To explore how often adolescents surf the internet and how long (hours) they spend on using the internet and social media
- To explore the RSH information that adolescents expect to gain by using the internet and social media
- To explore adolescent perspectives on using websites and social media to gain knowledge and information about RSH

Method

Design

A qualitative design has been conducted using eight focus groups (FGs) in discussions to gain adolescent perspectives about reproductive health education via using the internet and social media. The FGs discussed participants' perspectives, experiences and opinions about the provision of RSH information for adolescents through using the internet and social media

for reproductive health topics. The FG interviews were conducted in Arabic and audio taped. Participants were notified when the recording commenced.

Sample and Setting

The participants in this study were recruited using a snowball sampling technique. The sample size was 40 Jordanian adolescents aged between 15-19 years (males and females) distributed into eight focus groups. In addition, another 8 Jordanian adolescents were recruited to be interviewed face to face to reach the saturation of the data.

The eight FGs were conducted in three regions in Jordan (North, Middle and South) with two groups in each region (one for males and another for females). Different areas in Jordan were used as it was expected that the cultural differences among these areas would have an impact on the adolescents' perspectives towards using social networking and the internet to gain information about RSH.

Data Collection Methods

The researchers developed a set of open-ended and non-leading semi-structured questions relevant to the study goals. The questions were thoroughly reviewed by experts to make sure that the questions were culturally acceptable and appropriate to use. Furthermore, to make sure the final list of questions were understandable, a pilot study with five teenagers was conducted.

Ethical Consideration

Ethical approval from the Institute Research Board (IRB) at Al al-Bayt University was gained. Informed consents were obtained from participants and parents after giving them an information sheet about the study. The information sheet included the purpose of the study, an explanation that the study was voluntary in nature, and participants had the right to withdraw at any time without penalty.

Qualitative data analysis

The data collected through FGs and interviews, were transcribed for the content and managed. After cleaning the data, contents were looked at by each FG and interview questions, themes, patterns, relationships, and processes emerged.

Trustworthiness

Credibility was accomplished by taking a description back to the five pilot study participants to see if it reflected their perceptions. Truthful representations of the reality of the participants' data were presented with the aim of attaining trustworthiness¹⁵. An inquiry audit can be used to trace the data to their sources¹⁶. In this study, we audited the whole research process. The transferability of this study was insured because we gained similar findings from different areas in Jordan.

Results

48 Jordanian adolescents were recruited to participate in the study. The average time spent on using Internet and social media during vacation was 4.5 hours and 3 hours during week days. FGs findings regarding the participants' perspectives were presented in two main themes:

First Theme: e-reproductive health website: adolescents' perspective

In the era of e-learning and e-health, online methods have become an important and widely used method in health education and promotion. The participants in this study supported the idea of using a web-based platform to provide reproductive health information and skills as well as to discuss its contemporary issues.

One female participant stated (16 years old): *'I support the idea of developing a reproductive health educational website. Such websites regarding reproductive health improve the knowledge level of adolescents regarding reproductive health'*. Female participants expressed their support to developing a reproductive health website; a 17 years old female stated: *'I support at least that the site has privacy and confidentiality and supervised by specialists'*.

Most of the participants could not explain their ideas and views in depth. They gave short superficial answers to reflect their perspectives. However, one female participant from south area group expressed herself differently: a 19 year old female stated *'I support it because any female who cannot reach the health care providers to answer their questions can resort to the site and this shortens effort and time'*. Another female participant aged 15 years old from the same FG stated *'I supported it because some girls have neither awareness*

nor full knowledge about RSH'.

Another participant focused on the understanding that women and girls are in need to use the website because they have the perception that reproductive health means females' health. A female aged 18 years old said *'Yes, I support it, because it works on educating women and provides information she doesn't know by visiting the site.'*

Male participants in another FG provided different perspectives in supporting developing a reproductive and sexual health website. For example, a 16 year old male stated *'I support the idea largely because it increases awareness of people.'* Also two 17 and 18 year old males supported establishing a website because the use of electronic devices has become public and the availability of information on the internet. In addition, they felt less shame when accessing information. *'I support it because of the significant use of electronic means'*, and *'I support it because one can get the great information without shame'*. Some participants who supported the idea were concerned about providing the same content of information on RSH for all ages. For example, a 15 year old male stated: *'surely I support the idea but not for all ages'*. However, a few participants (4) were opponents of such a website because they thought that the RSH information is not appropriate for children if it is occasionally accessed by them.

Adolescent participants in this study were using social media and the internet to find information or knowledge because it is easier, faster and available through smart phones. A 15 years old described his use of social media; *'I use social media and the internet because it is available easily at home, on smart phones, and I can use it any time. So it is easier than books or stories'*.

The responses of male participants from South area presented similar reasons to use social media and the internet; they (15, and 18 year old males respectively) conveyed their opinions in superficial and short answers as follows: *'Easy access to information and multiple sources'*, *'Provides private, fast, and comprehensive information on reproductive health'*. These comments contradicted findings from female participants of the South area FG and male participants of the Middle area group. They reported that they did not use the internet to find any information regarding RSH issues.

Some participants were cautious in establishing such a website. Some of them supported using the internet and social media by the adolescents only if they use it under their parents' supervision. A 15 year old female reported "I do not mind using the internet and social media to gain information on RSH, but there must be control of parents to avoid misuse of such sites". Others supported establishing such websites only if it is managed and controlled by reproductive health specialists. For example, a 15 year old girl: "The administrators of such sites must be competent with their information on reproductive and sexual health topics and have a strict control of such sites" Their reasons for supporting this include that they feel ashamed to discuss some RSH topics with their parents and/ bold the line as well or brothers and sisters.

Second theme: the vehicle towards reproductive health knowledge

Using social media for RSH education was a preferred method but not all participants agreed. For example, a 15 year old female stated 'I have not used social media for seeking reproductive health knowledge'. Female participants (16 and 18 years old respectively) emphasized their need for information on reproduction and physiological problems, such as 'Information about the menstrual cycle, pregnancy period, and problems after the interruption of the cycle.', 'Adolescent health issues, psychological problems related to puberty'. Also, some participants emphasized the need for information about masturbation and sexual relationships. An 18 year old male stated 'I expect to find knowledge about masturbation, sexual relationship between partners, signs and symptoms of puberty in males.'

Participants in this study have many concerns about RSH issues. Their knowledge is insufficient and weak. They support developing a website for RSH education but they reported that they would be hesitant to use it. Some of participants preferred not to ask anyone about puberty changes nor would they use a website. However some participants reported that they may ask their parents or visit a doctor to ask about puberty. For example, a 16 year old male said 'I may ask my parents and visit a doctor'.

Findings from the interviews revealed more in-depth points of view. For example, in response to a question on why they are using the internet and social media to

learn about RSH, a 17 year old female stated: 'I use social media and the internet because it shows different people's opinions on issues regarding reproductive and sexual health, also, more explanations and information are available on such sites especially for issues that I feel shame to ask about, such as sexual intercourse'. An 18 year old male stated 'by using the internet and social networking we can find information on RSH introduced to us as adolescents in nontraditional ways as when we watch videos and request information from people in more private context; they don't even know who am I or where I am'. A female aged 16 years old stated "I support the development of an educational website in the area of RSH, for the sensitivity of these subjects and the restraints and embarrassment we may face".

It was noted that participants from the middle region including the main cities in Jordan such as Amman (the capital) and Zarqa (both cities are located in the middle district) talked about using the internet and social media to find RSH information without feeling shame. However, participants from South region and North region did not freely talk or express their needs about RSH education, although they supported the idea of developing a specified website regarding RSH education.

Discussion

Adolescents indicated that they often access social media and the internet to find out information regarding RSH. They explained that these resources were easy, quick to access and available through smart phones. This finding is consistent with the previous literature ^{10, 15}.

In addition, the participants supported the idea of using a web-based platform to provide RSH information and skills and to discuss relevant contemporary issues. The majority of the participants supported initiating a website to provide them with the essential RSH information although some of them are opponents of such website because they are afraid that these sites are inappropriate for children who may accidentally open it. This result is expected in the Jordanian conservative community.

An interesting finding in this study was that the participants' expectations about RSH knowledge on a website were varied and fragmented. The findings were superficial and were not in such a depth as to reflect the actual needs for RSH education of the Jordanian

adolescents.

It is worth noting that parental supervision should be the main source of information about RSH to their children. It is reasonable to understand that unmonitored internet use may place adolescents at significant risk of unreliable and incorrect information.

Building on the results of the current study, we shall propose to the local government to initiate a culturally sensitive website to meet the adolescents' RSH needs to gain accurate and reliable information regarding their RSH, introduced to them by reproductive health and community health experts. Thus, we recommend a culturally sensitive website in Arabic language (to our knowledge there are no such websites in Jordan). Such a website is expected to be responsive to the needs of the Jordanian adolescents and culturally competent to suit the Arab Islamic culture.

Declaration of Interest: The authors acknowledge the funding and support of Al al-Bayt University

Acknowledgment: The authors are grateful to Al al-Bayt University for the financial support.

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