

# MUSLIM ADOLESCENTS' SEXUAL AND REPRODUCTIVE HEALTH KNOWLEDGE INCLUDING STI/HIV, ATTITUDES AND EDUCATIONAL NEEDS: A QUALITATIVE STUDY

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## Background:

Young people are at a greater risk of acquiring STI/HIV. However, in the Middle East, there is currently no formal sexual and reproductive health (SRH) education or STI services offered specifically for adolescents.

## Methods:

This qualitative-descriptive study aimed to explore SRH knowledge, attitudes, and educational needs among adolescents in Oman. Eighty first-year undergraduate university students, aged 18-19 years, comprising 40 boys and 40 girls, participated in 16 focus group discussions and 16 in-depth individual interviews. We employed a convenience sampling approach, selecting students from four major universities located across four governorates in Oman.

## Results:

Thematic analysis revealed four major themes and nine subthemes. Both boys and girls interviewed demonstrated a lack of SRH knowledge, including awareness of STIs/HIV, and reported not receiving SRH education in school. They expressed a desire for comprehensive, age-appropriate SRH education starting from primary school to high school, covering topics such as child sexual abuse, puberty changes, contraception, and STI/HIV. Moreover, adolescents indicated that they mainly sought SRH information from friends, social media, and the Internet, as opposed to communicating with parents, school teachers, or school nurses about their SRH concerns. The socio-cultural taboo surrounding sexual discussion was identified as a primary factor discouraging open communication about sexuality. Additionally, participants expressed a preference for receiving SRH education from school teachers and nurses, emphasizing the importance of school policies supporting these educators with adequate resources, skills, and training to deliver effective SRH education.

## Conclusion:

The study findings highlight the lack of SRH knowledge among Muslim adolescents in Oman and their desire to receive comprehensive, age-appropriate SRH education. Therefore, this provides implications for school curriculum decision-makers and school healthcare providers to establish SRH education policies, enhancing adolescents' SRH and well-being in Middle Eastern countries and other regions with similar religious beliefs or socio-cultural contexts.

## Disclosure of Interest Statement:

No potential conflict of interest was reported by the authors.

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Human subjects approval statement

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