

# Final report form

**Date of sending out the form:**

Wednesday, June 9, 2021

**Contact person/applicant:**

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Poland

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**Title of the granted project**

POLKA 18 – youth-led research to advance adolescent sexual and reproductive health and rights in Poland

**Amount granted by the ESC (in euro)**

8000

**Project number:**

P-2018-B-03

**Allocated mentor:**

prof. Teresa Bombas

**Date project actually started:**

Thursday, February 14, 2019

**Date of completion:**

Saturday, January 18, 2020

**Please provide a report of your findings and data.**

POLKA 18 is a cross-sectional survey aimed at assessment of knowledge, attitudes and practices of Polish youth about their health, well-being and healthcare with particular emphasis sexual and reproductive health and a holistic approach to health promotion and adolescent health.

In December 2018, we conducted local consultations with young people in secondary schools, as well as with experts and academics,

to create a model of health priorities for Polish youth.

Given the discrepancy between the age of adolescents as an age group and age subject to parental authority in Poland, we only examined people who have 18 years of age (last years of secondary and technical schools).

Ultimately the timeline of the project has been the following:

- November 2018 - Five regions were selected from 15 active branches of the International Association of Medical Students' Associations - IFMSA-Poland;
- January - February 2019 - Finalization of the survey design
- March-April 2019 - Piloting the study in five regions, phase I
- June 2019 - Second meeting of researchers and partners
- September-December 2019 - Data collection, phase II
- December 2019 - Data analysis
- January 2020 - Final Researcher and Partner Meeting to Plan dissemination of results

Conceptual model of the study included: (1) Main Health Modules: mental health, lifestyle medicine, sexual and reproductive health and rights; (2) Necessary components of the enabling environment: (1) high quality healthcare services, (2) health education, including comprehensive sexuality education and, (3) freedom from violence

After the validation process, we have included in the final analysis 2700 responses from 6 Polish regions (Śląskie, Greater Poland, Lubelskie, Mazowieckie, Pomorskie and Zachodniopomorskie).

The STATA15 package has been used to carry out statistical analysis.

Population characteristics: 58% female, 41% male, ~0.7% not identified with any gender; 8.6% living with some type of disability; 10.2% identified as part of LGBTQIA+ population;

Main findings:

Mental health: young women reported significantly higher negative mental health indicators (more anxiety (84.2% vs 69.3% in men), more frequent panic attacks (45.2% vs 16.8% in men,  $p < 0.0001$ ),

increased tendency to eating disorders - 54.7% of girls want to lose weight (vs. 28.3% in young men), 6.1% vomited at least once a month to control their weight (vs 2.6% of boys) 17.4% reported unrestrained bingeing and overeating at least once a month (vs. 10.4 young men).

20.4% report that at least once in life had thoughts of suicide (22% young women vs 17.1% young men), 8.4% report self-harm (10.1 vs 5.3%); 46.2% sleep less than the recommended 7 hours per night

Sexual and reproductive health outcomes:

51% of the respondents had sexual intercourse (48.5% women vs 54.2% men)

5.8% of women and 10.1% of men reported sexual debut e at the age of 15 and less, 28.4% were affected at least once in their life the influence of alcohol at the time of sexual intercourse (26.2% women, 31% men); 5.7% reported 5 or more sexual partners (3.1% women, 8.8% men); 3.9% had sex at least once with person of the same sex

At first sexual intercourse: 76.5% reported to use a condom, 13.4% used oral contraceptive pills; 15% have used at least once in their lives emergency contraception;

Gynaecological health (answered only by participants who identified as women or people in need of gynaecological care): 3.8% has been diagnosed polycystic ovaries syndrome; 1.2% declared to suffer from endometriosis; 25% reported at least once in their lifetime had a urinary tract infection; 16.5% report that they had pain during the vaginal intercourse at least once they have ; Malodorous vaginal discharge occurred at least once among of 15.5% respondents who declared as female; 41% of women have not been to a gynaecologist yet, Twice as many young women were on your first visit to the private gynaecological office than in a public nationally funded place; only 16% of respondents reported to be vaccinated against HPV (22.6% Śląskie, 19.6% Greater Poland, 15.8% Lubelskie, 11.5% Mazowieckie, 11.4% Pomorskie and Zachodniopomorskie)

Menstrual health (answered only by participants who identified as women or are menstruators): Average age of menarche was ~12.8 years. 42% considered their periods to be heavy, or very heavy, 21% consider their periods to be irregular, or very irregular; 51% found their periods painful or very painful; 66% used what during the last menstrual period at least one pain relief tablet; 76% have stained their clothes at least once in during the day while menstruating; 78% missed school at least once because of menstruation; 37% had to use toilet paper with due to the lack of menstrual products

#### Lifestyle medicine and risk behaviour:

51.2% meet the criteria of WHO recommendations of 3x30 minutes of physical activity a day (45.8% in young women, 58.8% in young men). One in four respondents (25.7%) eats a portion of vegetables at least once a day, 15.6% drink at least once a day sweetened carbonated drinks. Every tenth respondent (10.4%); drinking an "energy drink" to say the least once a day. Only 4.5% have never tried alcohol, 28% reported drinking alcoholic beverage for the first time when being 13 or less; 66% have smoked a cigarette at least once in their lives (66.4 in young women vs 65.7 boys); 40.3% has at least once tried products containing marijuana, 3.6% of illegal psychoactive substances.

#### Healthcare services:

68% assess the attitudes of primary care physicians as well and very well; Only 38% believe that the waiting time is good and very good; 4% were refused sexual and reproductive health services at least once in their lifetime

Exposure to violence: 32% have experienced stalking, harassment by peers on in school (30% young women vs 33% young men); 23.8% have experienced stalking or online harassment (24.6% young women vs 22.6% young men)  
14% have experienced domestic violence; 7.5% were forced at least once in their lives by a partner to an unwanted activity, i.e. kiss, touch or sexual intercourse (9.7% young women, 3.9% young men); 6.6% have experienced physical intimate partner violence: 16.7% of psychological violence (19% in young people women and 13.4% in young men)

Health education, including comprehensive sexuality education: 52% declared participation in classes of "Education to family life" (we noticed a significant differences between the regions: 56.5% Greater Poland 53.7% Śląskie; 52.2% Pomorskie and Zachodniopomorskie; 49.5% Mazowieckie 44.8% Lubelskie; With regards to where young people learn about intimate health issues: 52% reported internet sources, 47% social media, 44% peers, 35% parents 31% doctors, 30% school, 6% religious classes

#### Interdisciplinary associations:

People with negative predictors of mental health more often reported premenstrual syndrome, more frequent exposure to any type of violence and more frequent risky sexual behaviors ( $p < 0.0001$ ) In the group of marijuana smokers and illicit drugs users, more frequent suicidal thoughts and self-harm were

reported (p <0.0001)

LGBT youth: Non-heterosexual people more often reported to have suicidal thoughts and self-harm acts. They much more often experience any form of violence at school (48% vs 30% general population); online violence (40% vs 22%); intimate partner violence (32% vs.15%);

Conclusions: Sexual and reproductive health is an integral part of health and well-being adolescents. Young women and non-heteronormative people have much worse predictors health, especially mental health, and a higher exposure to violence in comparison to young men and their heterosexual peers. We observed an undeniable association between mental health predictors and exposure to violence and risky behaviours (use of stimulants, risky sexual behaviour). The outcomes of menstrual health and its pathologies have a significant influence on comfort and functioning of menstruating people in the school environment.

**Please provide a final detailed budget on how much you have spent. Was any money not spent? Receipts may be requested.**

A separate Excel sheet has been shared.

**How will your findings be presented?**

Publication in journal

Presentation

**Was your paper published? Indicate journal and acceptance date**

We are planning 3 publications in the European Journal of Contraception and Reproductive Health as well as 1 in Polish Gynaecology Journal

**Presentation – note meeting organisation and date**

The findings of the pilot phase has been presented at the World Congress of Paediatric and Adolescent Gynaecology as well as have been included in ESC 2020 Congress Abstract Book. We had dissemination meeting in January 18th 2020 in Medical University of Warsaw.

**Add any other information you feel we should have**

We are continued the project in 2020 to capture the changes that happened during the COVID-19 pandemic.

**Please let us know whether having a mentor**

**has been helpful or not**

We managed to connect with the mentor only in the beginning of the project.

**Full Name**

Michalina Drejza

**Date**

Wednesday, June 9, 2021

Questions? ESC Central Office: [info@escrh.eu](mailto:info@escrh.eu)

**Type a question**

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