

1.1. Streszczenie w języku angielskim

Pregnancy and childbirth create a new situation for a woman, not only in the medical aspect, but also socially and psychologically, and this manifests itself in anxiety, especially in the case of the first pregnancy in an adolescent, as usually such a pregnancy is not planned. According to the WHO, teenagers are later to see a doctor than other women, have more difficult access to modern contraceptive methods, and are more likely to experience complications from abortions, specifically in advanced pregnancies. Studies indicated **increased risk** of complications during pregnancy and childbirth, and unsatisfactory health for young mothers in the years following childbirth. In Poland, unfortunately, there is no comprehensive policy for teenage mothers to support them in such a difficult socio-economic situation. There is also no extensive network of counselling and services for sexually active youth.

The main aim of the study was to evaluate the course of pregnancy, delivery and condition of a newborn baby in adolescent mothers in 2004-2008 in Poland and Belarus, as well as examining the level of knowledge and opinions of Polish and Belarusian adolescents on contraception and human sexual behaviour, in order to determine the knowledge deficit and possible creation of an educational program in this area. Six research questions and six hypotheses were formed.

The study was conducted after obtaining approval R-I-002/323/2009 from the Bioethics Committee of the Medical University of Białystok. Consents were also obtained from the managements of the hospitals in which the adolescent mothers gave birth, as well as from the schools and universities from where the respondents came from in the second stage of the study. The analysis was conducted on young mothers and adolescent respondents from Poland and Belarus, since Belarusian citizens are the second most numerous foreigner group in Poland (more than 50,000), and Podlaskie Voivodeship ranks second in that aspect, with an estimated 8369 people. Having considered the foregoing, it was decided that a young pregnant woman from Belarus could be a potential patient in Poland.

The medical records of 125 underage mothers giving birth and hospitalised in Grodno Hospital in 2004-2008 (Belarus) and 263 medical histories of patients hospitalised in 2004-2008 in Poland were analysed in the first stage.

A special Data Collection Sheet has been prepared for data collection in Polish and Russian.

In the second stage involved analysing the results obtained from authors' original survey questionnaire on the level of knowledge, opinions on contraception and human sexual behaviour, conducted among high school and first-year university students. A total of 700 questionnaires were distributed in Poland and 200 in Grodno, while 657 questionnaires from Poland and 164 from Grodno were used in the study. The study was conducted by a diagnostic survey method using authors' original survey questionnaire.

In third stage, the standard of sexual education for adolescents was developed in the context of being prepared for informed motherhood by a midwife.

The results obtained allowed the following conclusions: In Poland and Belarus, pregnancies of young adults were prevalent in girls aged 17 and over. The onset of sexual initiation was influenced by the country of origin, sex of the respondents, parents' education and religious practices. The very young mother's age in Poland and Belarus had a negative effect on the frequency of visits to the doctor, the course of pregnancy. Poland and Belarus have shown a deficit in adolescents' knowledge of human sexuality, influenced by sex and preferred religious practices. In these countries, the prevailing opinion was that sex education is needed and should be started as early as possible, but this depended on the respondents' sex and preferred religious practices. Respondents most often pointed to school staff with up-to-date knowledge and parents as educators in Poland and Belarus, with doctors, nurses and midwives indicated less often. A recommendation was also formed: In Poland, there are generally no educational efforts to prevent unwanted pregnancies and thus reduce abortions. Because of that, there is an urgent need for sexual education of adolescents, as well as medical and educational-psychological care for girls – future mothers. Parents and young persons' peers do not have enough knowledge about sexuality, and there is also a lot of false information on sexuality on the Internet, therefore it is necessary to draw the medical representatives' attention to the importance of sex education at various stages of medical services provided, and make them aware of the important role they should play in this regard. They must be aware that sex education is a type of social education and contributes to preventing all kinds of abuse. It is supposed to teach the expression of feelings and needs, provide the necessary life skills to cope with sexuality and relationships, teach respect for the needs of others and the boundaries they set, as well as show the principles of building relationships based on equality, with mutual understanding. The midwife should play a pivotal role in this regard, and therefore a standard was developed for sexual education of adolescents, in the context of preparation for informed motherhood conducted by a midwife.

