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Evaluation of Reproductive Health Care
Among college girls of Jabalpur City, Madhya Pradesh.
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Key Words: Abortion; Adolescent; Counseling; Sex-education

ABSTRACT

The present study was undertaken to assess the reproductive health care awareness among 250 college girls of other backward class of Jabalpur city Madhya Pradesh. Study reveals that 38.4 percent girls are having information regarding premarital counseling. 65.6 percent girls accepted that guidance and counseling before marriage is necessary. 46.4 percent girls feel free to discuss about their sexual queries, 94.4 percent girls are in favor of sex education. Doctors (38.5 percent) and mothers (32.6 percent) should provide sex education. 51.2 percent students accepted that female reproductive health as the most important segment of reproductive health, and 98.4 percent girls have desire to seek more information and knowledge on various issues of female reproductive health. 74.0 percent girls were having information regarding post-marital sexual information, 66.0 percent have information of conception and pregnancy. Only 19.2 percent girls have knowledge of male reproductive organs, 15.2 percent have ever heard about STD. 13.6 percent girls have positive opinion regarding premarital sex. 44.0 percent girls have knowledge of unsafe period of pregnancy, 12.8 percent had good idea of parturition, and 70.4 percent knew that unwanted pregnancy could be terminated. 52.0 percent accepted that abortion by trained person is safe. 82.4 percent girls accepted that there is need of adolescent clinic to combat the problem among youth. Regarding source of information electronic media is most powerful in providing confidential biological information to youth. It has been noticed that students have desire to perceive and update the knowledge of reproductive health. They also advocated for premarital counseling. Therefore it is suggested that college administration should establish adolescent clinic or premarital counseling cell at college level. Media specially television should realise the social responsibility and telecast informative interesting medical programmes on this vital issue.
INTRODUCTION:

It is well known that health care is only one of the several factors, which influence the health status of the population. The level of development achieved by a society is often determined on the basis of the level of health and the system of health, prevalent in the society. Currently reproductive health has five major challenging issues of (A^9) i.e. Aids, Abortions (unsafe) Adolescents (their health), Advocacy (To make youth aware for health rights) & Availability & Accessibility of health Services.

According to sai Fred (1986) reproductive health can be defined as the ability of man and women to undertake sexual activity safely, whether or not pregnancy is desired and if desired, for the women to carry the pregnancy to them safely, deliver a healthy infant & be prepared to nurture it.

The adolescent & Youth years are marked by the psychodynamics of change interpersonal, interapersonal, and extra personal. Sexual awakening among young girls is a time of confusion when they are unable to express and articulate their sexual needs & desires. (Jamshedji-2003).

The multiplicity of health problems associated with specific type of behaviour include the consequences of unprotected sex, which increases the risk of early and unwanted pregnancy & child birth, unsafe abortion and sexually transmitted disease. Young people are of high risk and ratio of STD and the incidence among adolescent has been increasing noticeable in recent years. Recent data shows that the AIDS epidemic continue to shift towards women & young people with 28.72percent of all HIV estimates to be women and 88.68percent of AIDS cases are in the age group of 15-49 years (www.naco.nic.in) This trend of data clearly points out the lack of knowledge about STD & how to prevent them among youth, high sexual behaviour patterns & low levels of contraceptive use, unprotected sexual behaviour among adolescent & youth can have severe consequences particularly for girls, through unwanted pregnancy maternal mortality, abortions & HIV/AIDS (Kapasi 2004).
In India it is estimated that about 6 million abortion take place every year, out of which 2 million are spontaneous and 4 million are induced, of the induced abortions nearly 5-6 lack are legal & the rest are estimated to be illegal (ICMR-1989). The proportion of maternal deaths due to unsafe abortions is 13 percent in less developed region of the world (WHO). Although unsafe abortions are a public health problem at all ages it is particularly so in case of young woman unsafe abortion is one of the most neglected areas of health.

The attack of sexual infection like AIDS, or unwanted pregnancy is purely the consequences of the behaviour of young ones. Young boys & girls get easily tempted towards experiencing sex. Youth by nature ignore the risk of getting infected and attempt self-experimentation. (Berwal-2005). Therefore it is necessary to advocate the rationalize social healthy atmosphere for young people. In which they can feel free to discuss their very personal issues & can perceive proper guidance & counseling which can very well cater their needs.

Hence the study is with objective:

1. To assess the reproductive health care awareness and knowledge seeking attitude of girls.

MATERIALS & METHODS:

For this sensitive natured study 250 girls of other backward class were randomly selected from different colleges of Jabalpur city. Girls have been provided a detailed questionnaire consisting questions related to reproductive health & counseling. Collected data have been analysed to know the extent of existing awareness & need of counseling to generate awareness among girls. Sample colleges were selected by random stratified method. Study was conducted in various colleges of Jabalpur.

RESULTS & FINDINGS:

Table 1 shows the attitude of girls towards premarital counseling. Only 38.4 percent girls were having information regarding premarital counseling 61.6 have no idea, about it. 65.6 percent girls accepted that guidance &
counseling before marriage is necessary. 46.4% girls feel free to discuss the sexual queries.

Attitude of young people towards sex education is significant. Regarding this majority of (94.4 percent) girls are in favor of provision of sex education. 29.6 percent girls mentioned that sex education should be provided at the age of above 16 years. While 25.4 percent girls mentioned 16 years, 16.1 percent girls accepted 15 years, 15.2 percent girls accepted 14 years, 6.7 percent girls mentioned 13 years & > 12 years or 12 years each. The major issue associated with sex education is who should provide sex education in society. In this context college girls have mentioned doctors (38.5 percent) and mothers (32.6 percent) should provide sex education, 26.6 percent girls leave the responsibility to teachers and only 2.1 percent to media (Table 2).

Table 3 reveals the knowledge-seeking attitude of girls, regarding reproductive health. Most of the girls wish to seek the knowledge on different aspects of female reproductive health i.e. menstruation, conception & contraceptives (98.4 percent). Next girls are interested to have knowledge regarding prevention of AIDS, followed by STD (58.8 percent), 45.6 percent girls mentioned reproductive organs. View regarding most important aspect of reproductive health, girls again mentioned female reproductive health (including contraceptives) i.e. 51.2 percent followed by sexually transmitted diseases i.e. 36.8 percent and then reproductive organs i.e. 26.4 percent (Table 4).

Table 5 reveals that TV provides sex information as accepted by 50.4 percent of girls. Regarding distribution of kind of information, 31.7 percent girls accepted that TV provides post marital sex information i.e. sexual relation & sexual transmitted diseases. 28.5 percent girls accepted premarital information is gained by television, 23.8 percent accepted regarding conception & pregnancy & only 15.8 percent girls mentioned that information related to infantile care is provided by television.

50.4 percent girls are having information regarding physical changes during adolescence (i.e. premarital sexual information) 74.0 percent girls are having information of post marital sexual information, while 60 percent girls
are having information regarding conception of pregnancy. As far as source of information of physical changes during adolescence is concerned 43.6 percent girls are informed by electronic media, 32.5 percent girls are informed by print media, 23.8 percent girls are informed by interpersonal communication. Regarding post marital sexual information 40.5 percent girls are informed by electronic media, 40.0 percent girls by print media (out of which 24.8 percent by magazines) & 19.4 percent girls by interpersonal communication. Regarding conception of pregnancy 50.7 percent girls are informed by electronic media (out of which 32.7 percent by television) 38.1 percent by print media (24.8 percent magazine) & 23.0 percent girls are informed by interpersonal communication (out of which 10.9 percent by teacher) **Table 6.**

**Table 7** shows the knowledge about reproductive organs, sexually transmitted disease and premarital sex relations. Only 19.2 percent girls are having knowledge about male reproductive organs, 75.2 percent girls having no idea, while 4 percent did not respond in this regard. 15.2 percent girls ever heard about sexually transmitted disease, 80 percent have not heard & 4.8 percent did not respond. Opinion regarding premarital sex, 13.6 percent agreed and 82.4 percent girls disagreed while 4 percent did not respond.

**Table 8** shows the knowledge of RH especially concerned with girls i.e. conception and parturition. 44 percent girls are having information regarding expulsion of ovum is on 10th 16th day of menstruation, 48.8 percent did not have any information in this regard and 7.2 percent girls did not respond. Regarding unsafe period for pregnancy 39.2 percent girls were having knowledge 48.8 percent have no information & 12 percent did not respond. Knowledge of parturition is important for girls, as each & every one has to go through this biological process of life. Only 12.6 percent girls had good idea of parturition, 54 percent girls had rough idea & 21.6 percent girls have no idea & 4.8 percent girls did not respond.

Regarding source of information of male reproductive organs 20.8 percent girls gleaned the related information from electronic media, 70.8 percent girls mentioned print media as source of information & only 8.3 percent girls are getting information through interpersonal communication,
Information of STD is perceived by electronic media (34.2 percent), print media (47.3 percent) & than interpersonal communication (18.4 percent) Girls are also having information & knowledge about unsafe period of pregnancy. 29.5 percent girls gained this information through electronic media and 39.7 percent through interpersonal communication. Regarding parturition 40.6 percent girls received information through electronic media, 29.1 percent girls through print media and 30.2 percent through interpersonal communication. (Table 9)

Table 10 shows desire of students to update the knowledge of reproductive health through different means. 82.4 percent girls accepted that there is a need for adolescent clinic, which can diagnose the problems of youth. 12.8 percent mentioned that there is no requirement of such clinics and 4.8 percent did not respond. Regarding means to enhance the knowledge and to combat the misconception and ignorance regarding reproductive health, 51.2 percent girls accepted that sex education at school or college level can easily enhance the knowledge, while 22.4 percent advocates for special clinic and hospital, 16.0 percent mentioned health workers would prove to be useful in this regard. 5.6 percent girls mentioned that there is no need for such arrangements and 4.8 percent did not respond. Regarding opinion for premarital sex 82.4 percent girls outright rejected the thought, only 13.6 percent girls agreed and 4 percent did not respond.

54.4 percent girls mentioned that pregnancy could be terminated in govt. hospital also with maintenance of confidentiality 31.2 percent had no idea, 14.4 percent did not respond. Awareness regarding abortion, study shows that 52 percent girls accepted that abortion by a trained person is safe while 31.2 percent girls have no knowledge & 16.8 percent girls did not respond (Table 11).

Regarding knowledge & awareness towards unwanted pregnancy, 70.4 percent girls correctly accepted that unwanted pregnancy can be avoided while only 8.8 percent girls mentioned it can not be avoided & 20.8 percent girls did not respond. Their source for this information is 44 percent electronic media 22.4 percent print media & 16.1 percent interpersonal communication (Table 12).
CONCLUSION:

The present study is an attempt to find out the extent of awareness of girls towards sensitive issues related to reproductive health care & need of counseling in their regard. The study reveals some surprising facts, regarding awareness, like 19.2 percent girls are having knowledge of male reproductive organs and only 15.2 percent girls had heard about sexually transmitted diseases although aware of AIDS. Girls indicate that they have desire to perceive, knowledge of reproductive health through means like provision of sex education or adolescents clinics. Girls also mentioned the need of premarital counseling. Most of the girls wish to seek knowledge regarding female reproductive health (including contraceptives). Students are also keen to have knowledge regarding prevention of AIDS. Girls are not much aware about unsafe period of pregnancy & knowledge of parturition. There is lack of knowledge regarding unwanted pregnancy & abortions.

RECOMMENDATIONS:

In India 50 percent of girls get married much before the age of maturity. In this respect premarital counseling is necessary for girls to avoid problems of reproductions health. Today approximately one fifth of the world's population are adolescents, when young people strive to fulfill their physical, intellectual, emotional, spiritual and artistic potential, they contribute enormously to society (WHO). Therefore their health during productive years is very important. Information education & communication (IEC) is a wonderful tool to create awareness, which can be easily performed through counseling in a whole. Teacher, parents, doctors, social workers, professionals, education material and guidelines can play a significant role in generating awareness of efficient counselor. Regarding mass media communication television has a large no of young audiences; the visual aspect enhances its interest & impact. It can relay information about reproductive health through serials & dramas. Information technology can also help in communicating such important information through mobile messages, as the consumer percentage of youth for mobiles is very high. Interpersonal communication can also prove to be helpful, through organizing health sessions with doctors, followed by question & answers session. The realization that this is a time for youth of significant
opportunities and risks highlights the urgency to deal directly with sensitive topics such as sex. Hence it is advisable that appropriately trained service providers must provide health counseling for betterment of health to young people so that they can live healthy.
REPRODUCTIVE HEALTH: A Survey of Knowledge, Attitude and Awareness among other backward college girls of Jabalpur City, Madhya Pradesh

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Key Words: Aquired Imuno deficiency Syndrome (AIDS); Attitude; Awareness; Belief; Knowledge; Menarche; Transmission.

ABSTRACT

The study was undertaken to find the knowledge attitude and awareness of 250 other backward class college girls of Jabalpur city Madhya Pradesh regarding reproductive health. It has been noted that 44.8% girls were pre-informed about menstruation, 60.7% of them were informed by mothers. Age of menarche is found to be 12 to above 14 years. Pain and fatigue are the most common problem of menstruation faced by girls. Complications of menstruation are commonly discussed with mothers i.e. 36.0%. Only 13.8% girls took advise from doctors.11.2% girls have experience of burning sensation or pain in vagina while 21.6% experience of vaginal discharge. Only 13.3% girls discuss the problem with Doctors, 5.0% seek the treatment.

Regarding awareness towards AIDS 94.4% students was having information and knowledge of AIDS. About 74.4% knew that disease is fatal and there is no cure to AIDS. 72% students had accepted that unsafe sexual relations are the reason for HIV infection.41.8% wrongly stated that AIDS could be transmitted by kissing. 75.3% knew sexually promiscuous & 72.4% mentioned prostitutes are at high risk of infection of AIDS. 37.0 % students knew that using condoms is safe measure to prevent AIDS. Television (54.5.%) is the best source of information to students regarding awareness towards AIDS. It...
has been found that even though college girls being educated are aware about reproductive health but still there is a critical gap of adequate knowledge. Hence it is suggested that parents and teacher should cater the basic information regarding sensitive queries of youth.

INTRODUCTION

Health of youth no longer requires justification. More than half the world's Population is below 25 years\(^1\). Youth is defined by the United Nations as 15 – 24; years of age\(^2\). In India adolescent and youth girls receive the least attention of all even though preparing for taking up marriage responsibility and in short span of time to motherhood for rearing the family. In this whole process they primarily face problems like high rates of anemia, early pregnancy, unwanted pregnancy, unsafe deliveries, frequent RTI and vulnerability of HIV/AIDS. It is mainly their lack or no access to information that makes them more vulnerable. Globally, WHO estimates that reproductive ill health account for 36.6\% of the total disease burden in women as compared to men 12.3\% of the same age. NFHS – 2 has also reported that 39.2\% women in India have one or more reproductive health problems\(^3\). Analysis of public Health policy in India, shows that state policy has thus for applied itself only to a section of health issues\(^4\), Areas thus for targeted by policy are not those affective women's health in a major way even within the reproductive of groups\(^5\).

Global burden of Disease study estimated that 27.4\% of disability adjusted life years lost in to reproductive ill health.\(^6\) Reproductive health encompasses a range of health concerns, as indicated in the consensus definition emerging from the 1994, International conference on population and Development at Cairo, In this RH is defined as a scale of complete physical mental and social well being and not merely the absence of disease of infirmity in all matters to the reproductive system and to its function and process.
Therefore this present study was conducted with the objective:

(i) To find out the knowledge, attitude and awareness regarding reproductive health among other backward College going girls of Jabalpur city M.P.

MATERIALS AND METHOD

The study was conducted at Jabalpur city in the state of Madhya Pradesh. Information was collected through a detailed Structured Questionnaire on randomly selected 250 college girls of other backward class consisting of reproductive health profile. (Age of menarche, Common problem during menstruation, hygiene practice, and reproductive health problems.)

RESULTS AND FINDINGS

Menstruation is a significant biological process that begins in the life of girls at the time of onset of adolescence. The first menstruation is often horrifying and traumatic. The behavioral patterns in response to menarche are usually influenced by certain beliefs, physical environment and other factors. Table I shows that 44.8% of girls were pre informed about menstruation. 55.2% were having no knowledge of menstruation before it started. The major source of pre information of 44.8% young women was their mother i.e. 60.7%.

Table II shows that age of menarche in other backward class girls is between 12 to 14 years of age. The age of menarche of 40.2% girls is 12 to 14 years and 58.2% have above 14 years. 88% girls have their menses regular and 12% only have irregularity in menstrual cycle. As far as cleanliness and hygiene practice is concerned cloth and sanitary napkins are the best choice of students. As 50.4% girls are using cloths where as 46.4% need sanitary napkins. 42.4% girls need less than 2 pads/day and 51.2% need 2 to 3 pads per day to change.

Pain and fatigue are the common problems faced by girls during menstruation. Pain during menses in the most prominent complication, prevalence of pre menstruation pain is 31.9% and 49.4% girl's commonplace
or sight of pain is waist i.e. 42.0%. 36.8% students mentioned abdominal pain and 12.2% have pain in legs during menstruation. A large no of students i.e. 66% girls feel fatigue during menses (Table III)

Table IV reveals that 57.6% girls go for counseling for common problems of menstruation, they need proper guidance and counseling at different levels while 39.2% need not required it. Mother is the best available counselor to discuss the problems with 36.1%. Only 13.8% girls take advice from doctors. 9.7% discuss their problems with friend and 11.8% with sister. 40.2% girls required counseling for problem of pain, 20.8% for excessive bleeding. For treatment part 45.1% girls were advised to take medicine (drugs) and 16.6% were advised exercise to alleviate the problem.

Important and major segment of reproductive health is RTI and STD. Young people are crucial for AIDS prevention and control. Very often it's during adolescence that people begin to experiment with sex. Paradoxically while youth are more likely to engage in risk behaviours they often less likely to be aware of the risk of transmission of RTI and STDs.

Knowledge and awareness towards AIDS and RTI is discussed in following tables.

Table V shows the profile of self-experience of reproductive health problem (in last 3 months only) 11.2% girls had experience of burning sensation or pain in vagina, while 21.6% had experience of vaginal discharge. Out of which 53.7% had white dense discharge while 24.0% have thin dirty foul smelling discharge and another 22.2% had odorless mucous kind of discharge. 46.6% girls experienced pain in lower abdomen as associated symptom with discharge, 10% have ulcer in vagina 26.6% experienced irritation in vagina. The complication of RH; shared 40% with friend, 36.6% with mother, 33% with sister. Only 13.3% girls shared or discussed the problem with doctor. Counseling for treatment in this context is important 53.3% girls feel parents as reliable source for treatment, 26.6% from friend and only 20% counsel for treatment form doctor out of which 10% from Govt. doctor and 10% from private doctor.
Table VI reveals that nearly all the students (i.e. 94.0%) were having information about AIDS; 43.3% knew that weakness, 28.9% knew continuous fever, and 22.8% knew tiredness is symptom of AIDS. About 74.4% knew that disease is fatal and there is no cure to AIDS.

Table VII shows that the majority of students (72%) had correctly accepted that unsafe sexual relations are the reason for infection of AIDS. About 51.2% of the student also had knowledge about the possibility of a new born getting AIDS from infected mother (in fetal life itself). 60.8% students knew that infected niddle is also a mean of transmission to AIDS.

Table VIII shows the student's perception about nonsexual route of transmission common to disease is presented for comparison in the table. About 66% wrongly stated that AIDS could be transmitted by casual contact like by kissing 41.8% knew that hugging may transmits the infection, followed by sharing utensils 10.9% breathing too close 8.4% shaking hands 5.6% mosquito or insect bite 3%, sharing cloths and sharing food 1.2%.

Table IX shows that the majority of students had correctly accepted that these are people at high risk of AIDS, like 75.3% knew sexually promiscuous and 72.4% knew prostitutes are at high risk of infection followed by drug abuser 48.3% and professional blood donors 53.1%. Only 13.7% indicated medical professional might carry infection while treating infected patients.

Table X reveals that a fair no of students were in favor of using condoms 37.0% to prevent disease transmission 29.9% correctly mentioned that one faithful partner will certainly prevent the infection, 15.0% students knew that infected mother should avoid pregnancy to prevent infection to her fetus, surprisingly only 9.2% students had knowledge that blood test before transfusion can prevent infection.

In awareness part regarding AIDS students clearly indicate, television as best source of information regarding AIDS. Table XI shows awareness of student towards symptoms, treatment, mode of transmission casual contact
and infection risk group and prevention of AIDS. TV, magazine, newspaper and radio in descending order having given a good coverage of information regarding AIDS i.e. 54.5%, 11.7%, 11.5%, 10.1% in average, rest of the knowledge was gained by conversation with friend, teacher and family members.

DISCUSSION AND CONCLUSION

Reproductive health of youth accesses their future motherhood. In present study the student community of Jabalpur has clearly indicated, despite of their fair knowledge and awareness towards reproductive health they are still confused on certain issues. The reasons in root are negative opinion and misconceptions regarding menstruation as well as reproductive health problems. Some times they fell shy by not communicating their problems and cannot get proper counseling and treatment thus perpetuating the problem. Therefore it is recommended that sufficient amount of health education must be provided to students. Adolescent clinic or youth cell at college can help by counseling the students regarding their reproductive health problems.

Surprisingly Mothers and Teacher and other family member who could play an important role in counseling them had little to contribute. Thus girls depending on media like Television and Magazine, Newspaper for gleaning information on the subject. But this kind of source are one way, which can only give information but can't provide solution to queries of individual one.

Conclusion of the study is that there is a lack of knowledge among youth regarding some of the vital functions and process of their body and reproductive health, parents and teachers have lack of responsibility to cater the basic information regarding reproductive health.