



# STUDY ON REPRODUCTIVE HEALTH AWARENESS AMONG ADOLESCENT GIRLS IN URBAN AND RURAL FIELD PRACTICE AREAS OF OSMANIA MEDICAL COLLEGE

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## ABSTRACT

**Introduction:** Reproductive health is a state of complete physical, mental and social wellbeing and not merely absence of disease or infirmity in all matters relating to reproductive system and its functions and process. RCH phase II programme implementation plan, the Ministry of Health and Family Welfare approved a technical strategy on adolescent reproductive and sexual health. The strategy focuses on reorganising the public health system in order to meet the service needs of adolescents.

**Objectives:** To assess the awareness level of adolescent girls regarding various reproductive health issues and to impart health education about menstrual hygiene among the adolescent girls.

**Materials and Methods:** A total of 760 adolescent girls (380 in each area) were interviewed. Menstrual history and history of other bleeding conditions are taken and interviewed about awareness on reproductive health issues.

**Results:** In the present study only 37.4% in rural area and 48.7% in urban area had prior knowledge on menstruation (before attaining it), and 61.3% of the rural subjects and 59.5% of the urban subjects did not know from which organ the menstrual blood was coming during menstruation. In those who knew about menstruation before attaining, mother was the main source of information in both rural (12.9) and urban (18.2) area. Majority of the rural respondents used cloth as absorbent during menstruation. Majority of the urban respondents used sanitary pads as absorbent. Majority girls whose mothers were illiterate or having low educational status used cloth or both as absorbent during menstruation in both rural and urban area (**statistically significant in both areas**). Majority of girls followed restrictions during menstruation. Most of the rural girls (42.9%) knew about the leucorrhoea as a white discharge when compared to urban girls (35.0%). Significant percentage of study subjects found to know that infection was one of the causes of leucorrhoea in urban and rural area with 42.1% and 30.1% respectively. In this study 47.7% in rural area and 54.5% in urban area knew correct legal age of marriage in girls.

**Conclusion:** There is poor knowledge regarding reproductive health issues in adolescent girls in both rural and urban areas. Hence there is urgent need to intervene in early adolescent period by imparting knowledge on reproductive health.

**Key Words:** Adolescent girls, Menstruation, Leucorrhoea, Legal age of marriage

## INTRODUCTION

Adolescence, the second decade of life, is a period in which an individual undergoes major physical and psychological changes. The word 'Adolescent' has been derived from Latin word 'Adolescere' which means 'to grow to maturity'. Adolescent is considered to be, no longer a child, and not yet an adult.

WHO defines Adolescence as 10-19 years old, 'Youth' as 15-24 years old and 'Young People' as 10-24 years old. The

adolescence has been divided into two phases: 'early' (10-14 years) and 'late' (15-19 years)<sup>1</sup>. Adolescents in India represent over 1/5<sup>th</sup> (22.3%) of total population.

Reproductive health is a state of complete physical, mental and social wellbeing and not merely absence of disease or infirmity in all matters relating to reproductive system and its functions and process<sup>2</sup>. Reproductive health, therefore, implies that people are able to have a responsible, satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to

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do so. Implicit in this are the right of men and women to be informed of and to have access to safe, effective, affordable and acceptable methods of fertility regulation of their choice, and the right of access to appropriate health care services that will enable women to go safely through pregnancy and child birth and provide couples with the best chance of having a healthy infant

According to the WHO, "Reproductive and sexual ill-health accounts for 20% of the global burden of ill-health for women, and 14% for men. Hospital based retrospective studies in India shows that primary amenorrhoea, menstrual disorders, leucorrhoea, and genital infections are most frequent complaints of adolescents<sup>3</sup>.

Menstrual hygiene is another important issue that every girl and woman has to deal with in her life. There is lack of information on the process of menstruation, the physical and psychological changes associated with puberty and proper requirements for managing menstruation. The taboos surrounding this issue in the society prevents girls and women from articulating their needs and the problems of poor menstrual hygiene have been ignored or misunderstood. Good menstrual hygiene is crucial for the health, education, and dignity of girls and women as it is an important risk factor for RTI. This is an important sanitation issue which has long been in the closet and there was a long standing need to openly discuss it.

The National Population Policy 2000 has recognised adolescents as an underserved, vulnerable group that need to be served especially by providing reproductive information and services. The health needs of adolescents have neither been recognised, researched nor addressed adequately, in particularly their reproductive health needs which are often misunderstood, unrecognised or under estimated<sup>4</sup>.

So in RCH phase II programme implementation plan, the Ministry of Health and Family Welfare approved a technical strategy on adolescent reproductive and sexual health. The strategy focuses on reorganising the public health system in order to meet the service needs of adolescents.

Hence there is urgent need to intervene in early adolescent period by imparting knowledge on reproductive health. Girl child, the women of tomorrow is a nation's asset. Give her an opportunity to develop as her development is the development of nation. To conclude, awareness regarding reproductive health during adolescents will go a long way in improving health of future mothers and building an effective and sustainable nation.

## OBJECTIVES

1. To assess the awareness level of adolescent girls regarding various reproductive health issues.

2. To impart health education about menstrual hygiene among the adolescent girls.

## MATERIALS AND METHODS

Study design: Community based cross sectional study, Study setting:-OMC field area harazpenta [urban] patencheru [rural], study population:- adolescents girls[11-19yrs] of age in harazpenta and patencheru. Sample size is 360 adolescents in urban area and 360 adolescents in rural area. Study period is one year [Jan 2012-Dec 2012]1month. Questionnaire method data analysis:-by using epinfo 3.5.1, ms excel statistical test:-chi-square, percent.

## RESULT

Majority of adolescent girls from rural area were in 14-16 yrs age group where as in urban area they were in 12-14 yrs age group and most of them were students. About 79.2% of urban and 77.6% of rural the study subjects were belongs to Hindu religion and most of the respondents belong to upper lower (42%) and lower middle (28.7%) in rural and urban areas respectively. The mean age of menarche was 12.45 and 12.46 in rural and urban areas respectively.

In the present study only 37.4% in rural area and 48.7% in urban area had prior knowledge on menstruation (before attaining it), and 61.3% of the rural subjects and 59.5% of the urban subjects did not know from which organ the menstrual blood was coming during menstruation. This shows that girls in both rural and urban area had poor knowledge on menstruation. In those who knew about menstruation before attaining, mother was the main source of information in both rural (12.9) and urban (18.2) area.

Majority of the rural respondents used cloth as absorbent during menstruation. Majority of the urban respondents used sanitary pads as absorbent. Majority girls whose mothers were illiterate or having low educational status used cloth or both as absorbent during menstruation in both rural and urban area (statistically significant in both areas). Majority of girls followed restrictions during menstruation.

Most of the rural girls (42.9%) knew about the leucorrhoea as a white discharge when compared to urban girls (35.0%). Significant percentage of study subjects found to know that infection was one of the causes of leucorrhoea in urban and rural area with 42.1% and 30.1% respectively. Some other misconceptions found in them were eating heat items, raw rice and pain abdomen. In this study 47.7% in rural area and 54.5% in urban area knew correct legal age of marriage in girls.

## DISCUSSION

A study done by Parvathi Nair<sup>5</sup> showed that nearly half (45.7%) of the girls who had attained menarche and 29% of pre-pubertal subjects said that they had prior knowledge about menstruation, Mothers (41%) were the most common source of information about menstruation, followed by elder sisters (22.4%), friends (21%), relatives (6.7%), television (4.4%), books (3.3%), and doctors (1.1%) which were similar findings in the present study. Drakshayani Devi K, Venkata Ramaiah P<sup>6</sup> conducted study on menstrual hygiene and found that, about 50% knew that hormones were responsible for menstruation. Most students (51) knew that menstrual bleeding originated from the uterus. Other sites mentioned were abdomen, intestines, and kidneys. Singh MM, Devi R, Gupta SS<sup>7</sup> showed in their study that the major sources of information were television (73.1%), radio (37.1%) and parents (36.1) A study by Parvathi Nair<sup>5</sup>, majority (74.8%) of the girls used homemade sanitary pads, nearly 24% used ready-made sanitary pads, while 1.5% used cotton wool. Drakshayani Devi K, Venkata Ramaiah P<sup>6</sup> stated that all but one used old cloth during menstruation, 25 reused the cloth, 16 disposed of the used cloth through Dhoby, 13 put it into a canal. Saritha agarwal, Alfia fathima, C.M. Singh<sup>8</sup> in their study on knowledge and attitude of adolescent girls towards reproductive health and related problem stated that only 10% of girls know about leucorrhoea. Sharma, Shipra Nagar and Goldy Chopra<sup>9</sup> that the percentage of girls knowing about the ideal child bearing age was (43.7%) perceived the age of 26 to 30 years as ideal child-bearing age followed by 31.2% for 18 to 25 years.

## CONCLUSION

In the present study only 37.4% in rural area and 48.7% in urban area had prior knowledge on menstruation (before attaining it), and 61.3% of the rural subjects and 59.5% of the urban subjects did not know from which organ the menstrual blood was coming during menstruation. This shows that girls in both rural and urban area had poor knowledge on menstruation.

- Those who knew about menstruation before attaining, mother was the main source of information in both rural (12.9) and urban (18.2) area.
- The mean age of menarche was 12.45 and 12.46 in rural and urban areas respectively.
- In the present study majority of the rural respondents used cloth as absorbent during menstruation. Major-

ity of the urban respondents used sanitary pads as absorbent. Majority girls whose mothers were illiterate or having low educational status used cloth or both as absorbent during menstruation in both rural and urban area.

- Majority of girls followed restrictions during menstruation.
- There is poor knowledge regarding reproductive health issues in adolescent girls in both rural and urban areas. Hence there is urgent need to intervene in early adolescent period by imparting knowledge on reproductive health.

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**Table 1: Table showing distribution of study population according to knowledge on organ from which menstrual blood is coming.**

Organ	Rural		urban		Total	
	Number	Percent	Number	Percent	Number	Percent
Bladder	48	12.6	65	17.1	113	14.9
External gentiles	61	16.1	29	7.6	90	11.8
Stomach	19	5.0	36	9.5	55	7.2
Uterus	19	5.0	24	6.3	43	5.7
Do not know	233	61.3	226	59.5	459	60.4
TOTAL	380	100.0	380	100.0	760	100.0

**Table 2: Distribution of study population according to absorbent used during menstruation.**

Absorbent used	Rural		Urban		Total	
	Number	Percent	Number	Percent	Number	Percent
Sanitary Pads	92	24.2	172	45.3	264	31.6
Cloth	171	45.0	85	22.4	256	33.7
Both	117	30.8	123	32.4	240	34.7
TOTAL	380	100.0	380	100.0	760	100.0