

Puberty and Pregnancy: Perception Among Visually Impaired Women



Social Science

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K. Kanmani

PhD Research Scholar Department of Population Studies Annamalai University Annamalainagar – 608002

A. K. Ravisankar

Assistant Professor Department of Population Studies Annamalai University Annamalainagar – 608002

ABSTRACT

This paper assesses the visually impaired women's understanding on Puberty and Pregnancy. Snow ball sampling methods was applied to choose 468 visually impaired women in 16 selected districts of Tamil Nadu during 2012-

2013.

The result shows that the respondents had better knowledge about puberty for girls rather than for boys. Majority of respondents (63.2 percent) had complete knowledge about puberty for girls and 36.8 percent had lack of knowledge. Married respondents had better knowledge and understanding of pregnancy when compared to unmarried girls. Chi-square results show statistical significance of the relationship between marital status of respondents and the respondents' knowledge about pregnancy. It can be concluded that a significant proportion of visually impaired women had inadequate knowledge about their own process of puberty and a major proportion of them have no idea about boy's puberty and their source of information was also not authentic.

Visual impairment and blindness is a significant public health problem in many parts of the world including the India. Visually challenged women experience a variety of unique health needs from adolescence to older age (Alemu and Fantahu, 2011). Persons with disabilities including the visually challenged people have the same sexual and reproductive health (SRH) needs as other people (Becker, Stuijbergen and Tinkle, 1997). Research shows that persons with disabilities are as sexually active as persons without disabilities (World Bank, 2004). In fact, persons with disabilities may actually have greater needs for SRH care than persons without disabilities due to their increased vulnerability to abuse (Bremer, Cockbum and Ruth, 2010). However they often face barriers to information and services. Sexual and reproductive health particularly deserves attention because these needs have been so widely and deeply neglected. Under this backdrop this paper made an attempt to examine the perception and attitude towards puberty and pregnancy among the visually impaired women.

Methods: The qualitative method was adopted to identify the sample districts with the support NGOs who are working in the rehabilitation services for blind people. The visually impaired women in the age group 15-49 were the target population of this study. It was conducted during 2012-2013 in the 16 selected districts of Tamil Nadu. Snow ball sampling methods was adopted to select the target population. Totally 745 visually impaired women who fall within the frame of operational definition were identified in the sample districts, however, 468 women accepted, co-operated and completed the interview.

Results: Today girls reach puberty at earlier ages when compared to the event that took place earlier. Nutritional and other environmental influences may be responsible for an early occurrence of puberty. However, most of the girls are ill informed and unlikely to receive the correct information on puberty and related issues, eventually their knowledge remains superficial and ridden with myths, misperceptions. Under this situation, the respondent's knowledge on puberty is assessed on the basis of their approvals or disapproval of some statements placed before them. Majority of respondents agree each of the statements given, but the proportion of agreement about each statement was considerably high among married respondents when compared to unmarried visually impaired women. It is to note that irrespective of marital status categories the respondents who have no idea about the statement 6 and 7 constitute comparatively high proportions. These two statements were concerned with puberty detail about boys.

Statement 1	In girls, the first signs of normal puberty may be evident after age 9 with the process largely completed by age 13
Statement 2	one of the first things that happens during a girl's puberty is the start of her monthly menstrual cycle followed by growth of uterus, breast, pubic hair, hips will widen
Statement 3	If a girl dose not attain puberty at the age 16, she may be having some biological problems
Statement 4	Over bleeding during menstruation is an indication of poor RH of a woman
Statement 5	Use of perfumes in the reproductive organ during menstruation cause dryness, irritation, infection, etc.
Statement 6	Boys start puberty about one to two years later than girls
Statement 7	First sign of puberty in boys is an increase in size of testicles, vocal cords grow

Therefore, the respondents had better knowledge about puberty for girls rather than for boys. Chi-square results show insignificant association between the knowledge about puberty and marital status of respondents.

Table No. 1 Percentage distribution of Visually Challenged Women by their Knowledge on Puberty

Knowledge on Puberty	Unmarried			Married		
	Agree	Disagree	DK	Agree	Disagree	DK
Statement 1 NS	79.5	3.1	17.4	85.3	2.3	12.4
Statement 2 ***	87.6	-	12.4	93.2	2.3	4.6
Statement 3 NS	86.3	5.6	8.1	87.0	5.9	7.2
Statement 4 ***	83.9	5.6	10.6	95.4	2.9	1.6
Statement 5 NS	74.5	9.9	15.5	83.7	6.2	10.1
Statement 6 NS	48.4	8.1	43.5	49.8	5.9	44.3
Statement 7 NS	50.3	1.9	47.8	62.5	1.0	36.5

***refers to significant at 1% level (chi-square results –Marital status and Knowledge on Puberty) NS – Not significant

Composite Index as a measure of the level of knowledge about puberty: An attempt is made to develop a composite index to measure the level of knowledge of the respondents about puberty. Level of knowledge index was developed based on girl's related puberty statements (1-5) and boy's related puberty statements (6-7) separately. There were three answers (agree, disagree and don't know) structured for each statement, which are given scores 2, 1 and 0 respectively. Respondent's agreement with each of the five statements was considered "complete knowledge" and disagreement with at least any of the statements was known as "lack of knowledge" about puberty for girls. Similarly, the respondents' "complete knowledge" and "lack of knowledge" about puberty for boys were measured.

Table No. 2 Percentage distribution of Visually Challenged Women by their Level of Knowledge on Puberty

Level of Knowledge on Puberty	Visually Challenged Women	
	Number	Percentage
Girl's related issues		
Lack of knowledge	172	36.8
Complete knowledge	296	63.2
Boy's related issues		
Lack of knowledge	266	56.8
Complete knowledge	202	43.2
Total	468	100.0

Table shows that majority of respondents (63.2 percent) had complete knowledge about puberty for girls and 36.8 percent had lack of knowledge. Regarding the knowledge about puberty for boys, 43.2 percent had complete knowledge and 56.8 percent had lack of knowledge which was high when compared to such knowledge for girls.

The analysis of the linkage between socio-economic and demographic characteristics of respondents and their knowledge about puberty for girls are presented in table 3. Table shows that while 83.3 percent in the age group less than 18 years had lack of knowledge, majority in each of the remaining reproductive age groups had complete knowledge. It indicates that the respondents in the latter reproductive age groups had comparatively better knowledge about puberty for girls. The relationship between age of the respondents and the knowledge about puberty for girls is statistically significant at 1 percent level. Though majority of respondents in each of the categories of caste had complete knowledge, the proportion having lack of knowledge in SC/ST category was comparatively high implying that the group in the low social hierarchy do not have much knowledge about puberty for girls. This relationship was found to be statistically significant.

Table No. 3 Percentage distribution of Visually Challenged Women by Level of knowledge on Puberty with their SED characteristics

SED	Level of knowledge on Puberty		Total
	Lack of knowledge	Complete knowledge	
Age*** 28.147			
<18 yrs	83.3	16.7	24
18-19	38.9	61.1	18
20-24	31.0	69.0	58

25-29	30.6	69.4	49
30-34	28.6	71.4	84
35-39	39.7	60.3	73
40-44	39.8	60.2	103
>44 yrs	30.5	69.5	59
Caste ^{NS}			
SC/ST	42.4	57.6	174
BC	32.5	67.5	246
MBC	38.5	61.5	52
Educational Status*** 26.975			
illiterate	47.2	52.8	72
1-5 yrs	57.1	42.9	35
6-10 yrs	39.6	60.4	111
11-12 yrs	43.7	56.3	87
above 12 yrs	22.4	77.6	143
Dip. in Teacher	20.0	80.0	20
Occupation ** 11.930			
Private	19.1	80.9	47
Public	22.2	77.	27
Self-empl	37.8	62.2	143
Not working/Dependent	39.0	61.0	182
Students	46.4	53.6	69
Marital Status ^{NS}			
Unmarried	42.2	57.8	161
Married	33.9	66.1	307

***refers to significant at 1 level (chi-square results -SED and level of understanding on Puberty) NS - Not significant

The role of education in the level of knowledge of the respondents about puberty for girls is empirically evident from table. Majority of respondents in each of the literacy and education attainment categories had complete knowledge, the proportions of lacking knowledge about puberty were comparatively high in the categories of illiteracy (47.2 percent) and different levels of school education indicating an association between education and the knowledge of the respondents about puberty. This association was found to be statistically significant at 1 percent level. In an attempt to examine the relationship between occupation status of respondents and their knowledge about puberty, majority of respondent in each of the occupational status categories had complete knowledge, the proportions had lack of knowledge were comparatively high in the categories of "Non-working" and "Students" and in contrast the similar proportions were relatively low in the two occupation categories: private and public sector employment. The association between occupation status of respondents and their knowledge about puberty for girls was statistically significant at 1 percent level. On an attempt to assess the linkage between marital status of the respondent and their knowledge about puberty, table shows that majority in each of marital status categories have complete knowledge about puberty and the proportion lacking complete knowledge about puberty is comparatively high in the "unmarried" category indicating better awareness of married women about puberty related matter. The chi-square results indicate statistically insignificant association between marital status of respondents and their knowledge about puberty for girls.

Knowledge on Pregnancy: Pregnancy is the fertilization and development of one or more offspring, known as an embryo or fetus, in a woman's uterus. A normal pregnancy lasts about 40 weeks and is grouped into three trimesters. Symptoms of early pregnancy include the absence of menstrual periods, breast changes, tiredness, nausea and vomiting, mood swings, excessive tiredness and fatigue and frequent urination particularly during the night or other symptoms.

Statement 1	A woman is most likely to get pregnant if she has sexual intercourse half way between her periods
Statement 2	A woman is supposed to have bleeding when she has sex for first time
Statement 3	A woman can experience pregnancy soon after having sex with a man
Statement 4	Pregnancy can occur by kissing or hugging

In this study an attempt is made to assess the respondent's knowledge about pregnancy on the basis of 4 statements about which the opinion was sought from the respondents. To declare a woman having complete knowledge about pregnancy related matters, she should agree with the first two statements (true) and disagree with the last two statements (misconceptions).

Table No. 4 Percentage distribution of Visually Challenged Women by their Knowledge on Pregnancy

Knowledge on Pregnancy	Unmarried			Married		
	Agree	Disagree	DK	Agree	Disagree	DK
Statement 1 ***	31.1	6.2	62.7	55.0	12.1	32.9
Statement 2 ***	12.4	8.1	79.5	53.4	15.6	30.9
Statement 3 ***	36.6	8.1	55.3	44.6	35.8	19.5
Statement 4***	1.9	80.1	18.0	4.2	94.5	1.3

***refers to significant at 1 level (chi-square results –Marital status and Understanding on Puberty) NS – Not significant

Table shows that majority of unmarried respondents had no idea about each of the first three statements indicating unawareness of pregnancy detail. In contrast, 80.1 percent disagree with the 4th statement indicating that the respondents had realized or understood the misconceptions about pregnancy from the 4th statement. In case of married respondents, though about one-third was in the category of "Don't know", majority agree with the first two statements indicating better knowledge about pregnancy when compared to unmarried girls.

Table No. 5 Percentage distribution of Visually Challenged Women by their Level of Knowledge on Pregnancy

Level of Knowledge on Pregnancy	Visually Challenged Women	
	Number	Percentage
No Knowledge	31	6.3
Less level of Knowledge (1-2)	343	73.3
High level of Knowledge (3-4)	94	20.1
Total	468	100.0

It is also noticed from the table that about 45 percent of married women agree with the third statement and 94.5 percent disagree with the fourth one indicating lack of knowledge about pregnancy and better knowledge about pregnancy misconceptions respectively. Therefore, married respondents had better knowledge and understanding of pregnancy when compared to unmarried girls. Chi-square results show statistical significance of the relationship between marital status of respondents and the respondents' knowledge about pregnancy on each of the four statements given. An attempt is made to develop a composite index to measure the level of knowledge of the respondents about pregnancy based on the 4 statements relating to knowledge about pregnancy. The analysis discloses that about one-fifth of the visually impaired women were had high level of knowledge about pregnancy (20.1 percent) and a significant proportion of respondents (73.3 percent) had less knowledge about pregnancy and just six percent had lack of knowledge.

Conclusion: It can be concluded that a significant proportion of visually impaired women had inadequate knowledge about their own process of puberty and a major proportion of them have no idea about boy's puberty and their source of information was also not authentic. It indicates that visually impaired women's needs have been so widely and so deeply neglected, or not being properly addressed. Hence, specific measures should be taken for mainstreaming disabled women to get better education on reproductive health which will help them practice safe and come out of traditional beliefs, misconceptions, and restrictions regarding puberty. It is recommended that increase and expand research should be carried out on reproductive health issues among visually impairment population and to improve coordination between partnerships and stakeholders at gross root level for better reproductive health practices among blinds.

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