



ORIGINAL RESEARCH PAPER

Gynaecology

REPRODUCTIVE HEALTH AWARENESS AMONG HIGH SCHOOL GOING ADOLESCENT GIRLS

KEY WORDS:
Adolescents, reproductive Health, contraception, mmmr And Imr

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ABSTRACT

AIM: Adolescence, one of the remarkable and distinct phase in the life cycle of women revolves around physical, psychological, sexual and social issues. This period of development corresponds roughly to the period between ages 11 to 19 years which is considered with the WHO definition of adolescence. This age group generally considered to be healthy. ASRM (adolescent sexual and reproductive health) is a measure area of concern. However we know that these group of population are faced with several well known health hazards making them vulnerable to a number of general, reproductive health and sexually related problems. This study was conducted among higher secondary school going girls about age group fourteen to eighteen, who are all belongs to adolescent age group. An attempt was made to assess the extent of awareness regarding reproductive health.

METHODOLOGY: A high school base study was conducted in four schools in BBSR. The number of sample was 500. Self formulated question airs were used to collect data from those school girls to assess their level of knowledge attitude and practice.

RESULTS: The present study revealed that most of the girls knew about physical changes that occurs during this period. In spite of poor knowledge on biological mechanism of reproduction these girls were aware of pregnancy, contraceptives, HIV infection. Three fourth of them knew how to diagnose pregnancy. But most of them felt the need for sex education. None of them had any proper knowledge on the term MMR or IMR.

CONCLUSION: Even if all of them were aware of Reproductive health in areas of pregnancy, contra ceptions and STDS but knowledge regarding RTIS cancer screening, MMR and IMR are poor. So discussion on preventive aspects of poorly understood subjects may help them in developing positive attitude towards reproductive hygiene, antenatal care, contraception and child birth. we found that school syllabus play a mojour role in providing knowledge in reproductive health issues.

INTRODUCTION:

Despite the fact that adolescent group represent almost one quarter of Indian population their reproductive health needs are poorly understood and ill served. Education and awareness regarding reproductive health have a profound influence in their health and fertility. The magnitude of the problem of these age group is well known to the health care provider and by virtue of the democratic share of this group contribute to almost a 22% or one in every five person is an adolescent. In our country about 243 million of adolescents stand at the cross roads between childhood and adult world. Reproductive health needs of adolescents have long been neglected. This includes all aspects of adolescents health. It consists of several distinctive and related issues such as sex education, mestrual hygiene, Reproductive tract infection prevention, abortion, child birth, contraception, cancer screening and maternal mortality. With effect of urbanization, liberal attitude in Indian society, rising age of marriage and greater opportunities for socialization having increased likelihood of indulging in sexual proximity at an early age. The burden of which is borne by female sex. Hence adolescent girls have greater risk of unwanted pregnancy, STDS, RTI and also spectrum of social and psychological consequences such as unsafe abortion and depression etc. These groups are carefully addressed by parents, teachers or existing health care providers. Even mothers are restricted themselves on their communications with daughters to the topic of menstruation only and reluctant to discuss on issues of safe sex or reproductive wellness. They think that by addressing these topics they will end up promotion of sexual promiscuity. On other hand effective sex awareness programme should start early in young people before they have developed established pattern of behaviour. There is need for creating awareness regarding reproductive health among this high school going adolescent age group girls.

METHODOLOGY:

A high school based study was conducted among 500 students of four different girls highschool in capital city of Odisha. A fter taking permission from school authority, teachers were explained on purpose of study. Verbal consents were obtained. Then open ended questionairs were given on awareness of reproductive health matters. Sample was selected considering WHO definition of adolescents and ability of students to responds to self

admistered questionnaires. Participation in this study was voluntary.

TABLE 1

Knowledge on menstruation	n=500	%
Need to bath during period	460	92%
Pain abdomen is natural	350	70%
Irregularities of menstruation is common	275	55%
Rest is needed during this time	405	81%
Menstruation stops during pregnancy	470	94%

**TABLE 2
SOURCES OF INFORMATION**

Text books	465	93%
Electronic media	380	76%
Friends	350	70%
Parents	165	33%
Teachers	55	11%
Doctors	16	3.2%

**Table 3
Willingness To Use Afc(adolescent Friendly Clinic) If Available**

YES	85%
NOT SURE	10%
NO	5%

Table 4: Diagnosis Of Pregnancy

Know about UPT	87%
By USG	57%
On physical examination by doctors	42%

**Table 5:
knowledge On Contraception And Family Planning**

Barrier method(condom)	90%
OCP	95%
IUD(COPPERT)	87%
Natural methods	14%
Emergency contraception	5%
Female sterilisation	55%
Male sterilisation	25%

Table 6:symptoms Of Rti

Itching	56%
Folliculities	24%
Abnormal vaginal discharge	85%
Pain in lower abdomen	55%
Abnormal bleeding	25%

Knowledge of girls regarding transmission of RTI that:

1. Physical relationship with infected partner as a route of infection known to 76% of girls.
2. Use of dirty clothes during period as a cause of STI was known to 43%.
3. Unsafe deliveries place and abortion by untrained persons lead to diseases were known to only 7% and 9% of students respectively.

Table 7: Knowledge Of Stds

HIV/AIDS	92%
HPV	16%
GONORRHEA	2%
TRIC HOMONOUS	0.6%
CHLAMYDIA	17%

This reveals that Text books are the most important source of information regarding HIV and contraceptives followed by electronic media, interpersonal communication and family members.

Knowledge on cancer screening is poor among these school going adolescent girls. PAP smear as cervical screening known to only 5%. Regarding MMR and IMR they have got very poor idea. Here 10% girls had heard of it.

DISCUSSION:

Adolescence is the period following onset of puberty during which a young person develops from a child into an adult. Also called teenage, youth, young adult. These years from young to adulthood may be roughly divided into three stages.

- Early_11 to14years.
- Middle-15 to 17years
- Late-17 to 19years

Our sample group mostly belong to middle age adolescents. In addition to physiological growth several key intellectual, psychological and social developmental tasks are squeezed into these year. This may be a time for most disorientation and discovery. This transitional period can bring up issues of independence and self identity. Many adolescence and their peers face tough choices regarding school work, sexuality, drugs, alcohol and social life.22% of population of India are adolescents and vulnerable segment. Health challenges of these group are significant. Under nutrition, anaemia, early pregnancy, increased maternal mortality largely owing to early pregnancy, STDS including HIV. Needless to mention that healthy adolescents are backbone and foundation of healthy mother and they are ultimate future of society. In our study sample all had attained menarche. About 25% did not aware of biological reason for menstruation. Very few of the girls could correctly explained the process of reproduction. Most common problem faced by these girls are menstruation and related problems. Over two third of girls wanted more information on reproduction. More than 90% of the sample had heard about contraception mainly OCP and Condoms .47% heard about emergency contraceptives. Almost all had heard about HIV/AIDS. But were lacking correct knowledge. All of them willing to attend adolescent clinics. In school particularly in coeducation system teachers are uncomfortable in teaching topics related to reproduction. Though the need for reproductive health information is acknowledged by teachers not all are in favours of providing sex education to school children. Regarding contraception about 70% correctly explained the process of reproduction. School syllabus was the source of information which play an important role. Teachers are not able to clear their doubts. Our study shows that common source of information are school books, electronic media, friends, parents , teachers as shown in the

tables. So if school syllabus taught correctly can help in improving the reproductive health awareness among adolescents. Overall friends play a greater role. Even media play a main source. Regarding contraceptive knowledge above 90% were aware of barrier method/condoms.Main source electronic media followed by friends.95% were aware of OCP. This shows higher level of knowledge in present study. Regarding Intra uterine devices 85% knew about this method. Knowledge on permanent methods of contraception was found comparatively poor. Where 55% were aware of female sterilisation where are only 25% had knowledge on male sterilisation. Knowledge on emergency contraceptive is poor. only 5% were aware of it. This is very poor and more open discussion has to be done on this topic. This knowledge will help in reducing unplanned pregnancies and complications from abortions. About 60% of adolescents were ready to attend AFC. Less than 10% were not interested when others were not sure. Regarding diagnosis of pregnancy about 87% were aware of urine pregnancy test and half of them knew that USG being used as diagnostic tool. All these knowledge are important for young adults as early diagnosis and proper care during early pregnancy also suitable and safe for intervening in case of unwanted pregnancy. Anaemia is a common problem in Indian female. We did a study on awareness regarding investigations like HB and blood grouping. It was found that 48% know about iron supplementation. Through this study revealed that mostly girls are aware of different modes of deliveries but poor knowledge on average birth weight and causes of infant mortality rate. Regarding symptoms of RTI above 1/3rd of present study sample knew of itching, folliculities, lower abdominal pain and vaginal discharge as symptoms. On attitude towards sex education 95% of study population show interest to know more about it as it is beneficial in maintaining good health. Overall knowledge on cancer screening is poor and this area needs attention. Awareness should be developed regarding different cancer screening methods like pap smear, mammogram .

CONCLUSION:

Information on reproductive health and related issues are far from satisfactory and special care should be taken among adolescents, parents and teachers. School curriculum being the primary source of information needs to be strengthened so that teachers will be able to discuss openly and delicately with students. Reproductive health should be an integral part of education and its objective shown by to reduce adverse outcome from sexual behaviour, unwanted and unplanned pregnancy, RTI as they influences future health. Discussion on MMR and IMR may sensitise the girls. That will help them in decision making in matter like ANC, contraception and childbirth.

REFERENCES:

1. Reproductive health awareness among urban school going adolescents in Varodara city. P.V.Kotecha, Sangeeta V.Patel, V.S.Majumdar, R.K.Baxi, Sobha Mishra, Mansi Diwani, Harsh Baksi, Ekta Modi, Sandeep Shah, Kalpita Sringarpure.
2. A study of awareness of reproductive health among college students of Visakhapatnam. Sailaja Gollakatta and Seshagini Rao, Mylavarapu and Padmavathi K.
3. Reproductive health awareness among adolescent girls in rural Bangladesh. Md . Jashim Uddin, Abdul Mannan choudhury.
4. Reproductive health research challenges Regina Kullu and Aldo Campana.
5. Knowledge and attitude about reproductive health among rural adolescent girls. Kuppammandal. An intervention study. k.Mallesappa, Shivaram Srinivas, Nandini.
6. Reproductive health awareness among adolescent girls in rural Nepal. Iju Shakyia.