Women Awareness

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INTRODUCTION:

- The objective is to focus on important components of women's health and overall well-being.

PROMPT:

THE STATUS OF WOMEN IN TELANGANA

- Literacy rate
- Marriage and fertility
- Maternal care
- Use of family planning services
- Screening for cancer

METHODOLOGY:

- Data selection focuses on awareness of women's health and well-being.
- For analysis: Tools used - Excel and R programming
- Data visualization - Bar charts, scatter plots, and box plots.
- Inferences based on the data visualization.

1. LITERACY RATE:

Literacy rate of women in both urban and rural districts is lesser than that of men.

2.MARRIAGE & FERTILITY

The percentage of pregnant women (Age: 15-19)
and women married before 18 years (Age: 20-24)
is higher in rural areas as compared to urban areas.

MATERNAL CARE

1. ***Children who received postnatal care***

, Jangaon has the highest percentage of children receiving postnatal care.
Adilabad has the lowest percentage of children receiving postnatal care.

2. ***Mothers who received postnatal care***

Warangal rural has the highest percentage of mothers receiving postnatal care.
Siddipet has the lowest percentage of mothers receiving postnatal care.

Mothers who consumed folic acid during pregnancy

less than 50 percent of Women consume iron-folic acid for 100 days or more.
Less than 50% of Women consume iron-folic acid for 180 days or more.

ANAEMIA AMONG WOMEN

- The rural population including children, pregnant, non-pregnant women are more anemic than the urban females and children population in Telangana.

FAMILY PLANNING

Massive difference between the sterilization rates of men and women both in urban and rural districts. In particular, the sterilisation rate of men in rural districts is higher.

CANCER SCREENING & LITERACY RATE

- Total female literacy (2019-2020) - 66.6%
- Total screenings for cervical cancer (2019-2020) - 3.3%
- Total screenings for Breast cancer (2019-2020) - 0.3%

CONCLUSION:

- The status of women in Telangana is lagging behind on the grounds of gender equality and healthcare.
- The urban-rural status gap needs to be bridged on several levels.

POLICY RECOMMENDATIONS:

- The gender gap in education can be reduced by reviewing the implementation of the Saakshar Bharat program and channel more focus and resources towards female literacy in both rural and urban districts.
- Skilled and competent teaching personnel should be employed and a system should be brought in place to ensure mandatory enrollment and attendance of female students in each locality.
- Postnatal care is crucial for a newly born child. For the districts receiving a low percentage of postnatal care :
- To keep track of the data files of registered pregnancies and their postnatal care using Data Analysis tools.
- Postnatal care is crucial for a new Mother. For the districts receiving a low percentage of postnatal care :
- To keep track of the data files of registered pregnancies and their postnatal care using Data Analysis tools.
- To arrange a quarterly awareness campaign educating the rural citizens about :
- Childhood marriage
- Sex education
- Early pregnancy
- According to Centres for disease control and prevention, it is important to consume enough iron-folic acid to avoid neural tube defects. Women should be made aware of the positive effect of folic acid as it is important to have essential nutrients.
- Alternate family planning methods should be discussed and awareness must be created about the ease, simplicity, and safety of male sterilization rather than female sterilization.
- Cancer awareness must be increased among both rural and urban women. Periodic cancer screenings must be made mandatory for women of age.
- The cervical cancer vaccine (HPV vaccine) must be encouraged by doctors and the government can ensure a smooth vaccination process by regulating the price and expanding the availability across all hospitals.