

Chapter-VII

FINDINGS, SUGGESTIONS AND CONCLUSION

MAJOR FINDINGS OF THE STUDY

7.1 GENERAL INFORMATION

A maximum of 41 percent of the women comes under 26-35 years age group. The majority of the respondents (78%) belong to Hindu Religion, while Muslims and Christians accorded to (12%) and (10%) respectively. Half of the respondents (54%) of the respondents belong to the backward class, while nearly one fourth of the respondents belonged to Scheduled Caste, and around 8% belonged to Scheduled Tribes, a little less than one fourth of the respondents (21%) belong to Forward Class. Illiteracy is noticed to an extent of 14 percent. Among the study population primary education (42%) is higher than secondary (27%) and higher education (17%). 51 percent of the subjects have pucca house, the respondents who stay in semi pucca house include (42 percent), while only (7 percent) of the respondents stayed in kutcha house.

79 percent of the respondents are using LPG, while less than one fourth of the respondents (10 percent) of the respondents are using wood for cooking, 7 percent of the respondents are using electricity and a very few (4 per cent) of the respondents are using bio gas. 79 percent of the respondents have the toilet constructed in their homes, 15 percent of the respondents go for open defecation and 3 percent are using public toilet system. The presence of livestock at home and it is clear that a large majority (81 percent) of the respondents own livestock.

Majority of the respondents (70 percent) of the respondents own vehicles, while nearly one fourth of the respondents (30 percent) do not own any vehicle.

7.2. HOUSEHOLD CHARACTERISTICS

25 percent of the respondent's households use the public well, nearly one fourth of the respondents households use well water, another one fourth of the respondents use piped water, while thirteen percent of the respondents use surface water, seven percent of the respondents use water from tankers and five percent of the respondents use the ground water. A large majority of the households have Pit Toilet (84 percent), a less percent that is eight percent of the households use flush toilet (9 percent) and a very less (7 percent) of the households do not have toilet facility. Almost all the respondents that are 99 percent of the respondents have electricity and only 1 percent of the respondents use kerosene lamps.

72 percent of the respondents do not have a separate room for kitchen and while 28 percent of the respondents have a separate room for kitchen facility. Majority of the respondents 95 percent have an Own house facility, and a few respondents 5 percent do not have own house facility. 91 percent respondents have agriculture land, and a few respondents 9 percent do not have agriculture land. Very large percentage of the respondent's households own agricultural land between 1-5 acres, while a little less than the one fourth (25 percent) of the respondents households own agricultural land between 6-10 acres, while three percent of the respondents households own agricultural land between 11-15 acres.

7.3. REPRODUCTIVE HEALTH

46 percent of the respondents have said that the age of marriage was twenty years, while more than one fourth (33 percent) of the respondents have said that their age of marriage was eighteen years, 18 percent have said that their age at marriage was twenty two years, and only (3 percent) of the respondents have said that their age at marriage was thirty years and above. More than three fourth of the respondents (84 percent) said that they take the decision jointly with the members of the family. A little less than one fourth of the respondents (10 percent) have said that the decision was made with future spouse by involving the respondents. Only (3 percent) have said for themselves another (2 percent) have said consent in made by future spouse family members and only (1 percent) of the respondents said consent was made by others.

66 percent of the respondents totally agree that women's focus primarily on family matters, nearly one fourth of the respondents (24 percent) agree, while only (7 percent) do not know if women's focus is on family matters, only (2 percent) of the respondents said they partially disagree and only (1 percent) of the respondents totally disagree that women's focus is primarily on family matters. half of the respondents(44 percent) have totally agreed that career and civic activities are of secondary importance to them, less than half of the respondents (35 percent) have agreed that career and civic activities are of secondary importance, less than one fourth of the respondents (14 percent) said that they do not know, while (5 percent) of the respondents partially disagree,

that career and civic activities should be of secondary importance and only (2 percent) of the respondents have totally disagreed.

77 percent of the respondents have only Two children, less than one fourth of the respondents (11 percent) have one child, another (10 Percent) of the respondents have told that they have three children, and (2 percent) of them said that they have four children. Nearly half of the respondents (42 percent) have said that both wife and husband are involved in decision making while more than one fourth of the respondents (30 percent) have said that only husband decided, around (10 percent) of the respondents have said other members of the family like (parents, parents-in-law and relatives are involved), interestingly (12 percent) of the respondents have said that physician was also involved and only (10 percent) of the respondents said that it was self decision.

The respondents (47 percent) have said that the wife and husband together have the final say and it is almost the same percentage of respondents who have said that both are involved in decision making. It is also observed that more than one fourth of the respondents (40 percent) have said that husband has the final say, while (7 percent) of the respondents have said that their other member of the family have the final say, another (3 percent) of the respondents have said that the physician had the final say and only (3 percent) of the respondents have said that final say was their and it is same as decision making. half of the respondents (52 percent) have agreed that financial situation affects the decision making process, less than one fourth of the respondents (9 percent)

have said about the availability of accessibility of family planning services, (9 percent) of them said about the desire for a son in the family, (7 percent) of them have told about the family pressures, (7 percent) of them have told about the abortion, (6 percent) have told about the desire for a daughter in the family, another (5 percent) have told about social norms and (5 percent) have told about inadequate housing.

Nearly half of the respondents (55 percent) have said that they had spacing for 2nd and 3rd years, less than half of the respondents (42 percent) have said they had spacing between 1st and 2nd years, less than one fourth of the respondents (5 percent) have told that they had spacing between 3rd and 4th years. Majority of the respondents (77 percent) have said that there should be spacing and another one fourth (23 percent) have said that spacing should not be there. Majority of the respondents (80 percent) of them have told that they prefer a male child. A little less than one fourth of the respondents (20 percent) have told that they do not have any preferences for male child. 100 percent of the respondents are aware about the Family Planning, but what is important is how effectively are the using Family Planning Management.

7.4 USE OF CONTRACEPTIVES

86 percent of the respondents have agreed that either they or their spouse is using contraceptive to avoid getting pregnant and a less than one fourth of the respondents 14 percent have said that neither them self nor their spouses does

not use contraceptives to avoid getting pregnant. 52 percent of the respondents have said that they agreed they are using pills, a little more than one fourth 21 percent of the respondents have said that they are using pills, a little less than one fourth of the respondents 19 percent of the respondents have said they are using condom and a very few of the respondents 8 percent have said that they are using FS method.

55 percent of the respondents have said that they were using it from one month, a little less than half of the respondents 24 percent have said that they were using two months, 18 percent of the respondents have said that they were using it continuously for more than five months. 48 percent of the respondents have said that it is not applicable, 32 percent have said that the supply of contraceptives is not there whenever they need and nearly one fourth 20 percent of the respondents have said that the supply is there continuously. 55 percent of the respondents have said that they got the supply from public, 26 percent of the respondents have agreed that the supply was from private source, 7 percent have said that they got the supply from NGOs, another 9 percent of the respondents have said that the supply was from medical store, and another 3 percent of the respondents have said the supply was from other source.

Majority of the respondents 47 percent have said that the government doctor had inserted the loop, 43 percent of the respondents have said private doctor had inserted; only 9 percent of the respondents have said that the trained volunteer had inserted and only 1 percent of the respondents have said other

sources. 44 percent of the respondents have said that the government doctor had inserted the loop, 36 percent of the respondents have said private doctor had inserted, only 15 percent of the respondents have said that the trained volunteer had inserted and only 5 percent of the respondents have said other sources.

50 percent of the respondents have said that the health worker had motivated them to use Family Planning Method around thirty 35 percent of the respondents have said that the doctor motivated them, around 8 percent of the respondents have said that their husband motivated them, only 3 percent of the respondents have said that it was self motivation one percent of the respondents have said that in-laws motivated them, on other 2 percent said that neighbours motivated them.

Majority of the respondents 41 percent have said that the quality of care they received while undergoing the treatment was alright, around 37 percent of the respondents have said the care was very good, 17 percent of them have said that the care was not so good and only 5 percent have said that the care was good. 100 percent of the wives have agreed that they spoke to their husbands about FPM. 100 percent of the women have said that there is approval from their husbands about the contraceptive use. 31 percent of the respondents has said that MIL was not there, almost the same percent of the respondents (29 percent) have said that their mother in-law was on Interfering nearly one fourth (23 percent) of the respondents have said that there was no approval and only 17 percent of them have said that was mother in-law approval.

7.5. Health Concerns

54 percent of the respondents have said that their health is good, a little more than one fourth of the respondents (30 percent) have said that their health condition is moderate, 7 percent of the respondents are not aware of their health status while only 9 percent of the respondents have said that their health condition in poor. A vast majority (48 percent) of the respondents have not suffered any health hazard in the recent past. Nearly one fourth of the respondents (26 percent) have suffered from UTIs, while a little less than one fourth of the respondents (18 percent) have suffered from skin diseases, 5 percent of the respondents have suffered from Asthema and another 3 percent of them have suffered from other health hazards which were not mentioned. 77 percent of the respondents those who were infected have said that they seeked treatment, while only ten percent of the infected respondents have said that they did not seek any treatment.

The majority (59 percent) of the respondents have said that they went to private hospital, nearly one fourth of them (21 percent) have said that they went to government hospital, 10 percent have said that they went to RMP/ PMP, a small percentage (5 percent) of them followed traditional methods. 58 percent of the respondents have said that never heard about STI, while almost another forty two percent have said that heard about STI. 71 percent of the respondents have got the information from PPTCT, a less than one fourth of the respondents (16

percent) have received from ICTC, another seven percent have received from other sources and a very less percent (5) have got the information from PHC.

55 percent of the respondents have told that they have not heard of STI, while a less percentage of the respondents (7 percent) have said that they have heard about STI, while nearly one fourth of the respondents (38 percent) say it is not applicable for them. 71 percent of the respondents have told that they have not heard of STDs, while a less percentage of the respondents (8 percent) have said that they have heard about STD, while nearly one fourth of the respondents (21 percent) say it is not applicable for them. majority of the respondents 64 percent) of the respondents have agreed that they got the source of information regarding FPM from PPTCT, nearly one fourth of the respondents (21 percent) have agreed that they got the information from ICTC, a little less than one fourth of the respondents 15 percent) have agreed that they got the information from PHC.

7.6 Human Rights

92 percent of the respondents are not aware reproductive right, while a very less percent (8) of the respondents are aware of the reproductive rights. a little less than half of the respondents (35 percent) of the respondents have said that they got the information from print media, nearly one fourth of the respondents (22 percent) of them have told that Television is the source of information, another (18 percent) of the respondents have said that educational

establishment in the source of information, while (10 percent) of them have said that their spouse / partner in the source of information.

88 percent of the respondents have said that men & women are equal in rights while (7 percent) of the respondents have said they do not know and (5 percent) have said that men and women are not equal in rights. Majority of the respondents (77 percent) have agreed that a women has a right to make autonomous choice about her reproduction freely and without concern, 12 percent of the respondents have said that a women has no right and another (11 percent) of the respondents were undecided. 39 percent of the respondents have said that it is important to know about their rights, 33 percent of the respondents have said that it is not important to know about their right, while another (28 percent) of the respondents were undecided.

54 percent of the respondents have agreed that one should learn about Human Rights from school, while nearly half of the respondents (44 percent) were undecided and only 2 percent of them have said that there is no need to learn about Human Rights from school. 54 percent of the respondents were undecided if they are aware of (RA Law), 40 percent of the respondents have agreed that they are aware of the RA law and only 6 percent of the respondents said that they are not aware about RA law.

43 percent of the respondents have said that they learnt from the print media, while a little less than one fourth of the respondents have said that they

learnt from Television, another (23 percent) have agreed that they learnt from educational establishment, 12 percent have learnt from family and another (13 percent) have learnt from spouse. 79 percent of the respondents have not heard about international organisational involvement in RH & Reproduction, while less than one fourth of the respondents (21 percent) have said that they are aware.

54 percent of the respondents have said that they came to know through government hospital about International Organizations, 35 percent have said that the source is NGOs and 11 percent of the respondents have said that the source of information in PHC. 24 percent of the respondents said they care but do not know what to do, another (22 percent), ,have said that they know what to do but don't know how to do it, another (16 percent) have said that they have support but lack a sense of urgency, another (10 percent) of the respondents have said that they know but don't care and another (8 percent) have said that they do not know about the challenges in the Reproductive Health that women face today.

7.7 Suggestions

The researcher has identified some of the key issues or problems faced at the ground level by rural women in Chittoor district. In order to mitigate the problems identified the researcher is of the opinion that the following actions or measures may yield the intended results. They are;

1. Government or district authorities may utilise print/electronic media to its fullest potential in popularising the importance of FPM and reproductive health.
2. Intensive schemes/programs aimed at improving the reproductive health of rural women needs to be executed in the study area.
3. Each rural family should be considered as a unit for counselling on FPM and RH.
4. Government should encourage NGOs working on women empowerment.
5. Incentives may be offered for the successful couple who achieved child spacing by practicing of FPM methods.
6. Success stories may be highlighted in a motivated manner.
7. Pre-existing activities on FPM and RH should be taken up at an intensive scale.
8. A comparative study can be carried to ascertain the knowledge regarding reproductive tract infections between urban and rural community.
9. Effective health awareness programs to change the perception of illness of Muslim households.
10. Improving the public sector health facilities to reduce the burden of medical expenditure of households.

11. Measures to improve the work participation rate of Muslim women are needed.
12. Measures to promote the involvement of Muslim women in social and political activities are desirable.
13. Women employment should be encouraged so that they could contribute financial support to their family.
14. Respondents having 2 or more children needs motivation in adopting family planning.
15. Respondents having their first issue before 20 years of age need motivation to differ their first issue through awareness program.
16. Respondents preferring home delivery should ensured trained birth attendant or skilled nurses at the time of delivery to avoid complications.
17. Early detection and treatment of reproductive tract infections and diseases need special attention by improved surveillance system in the study area.
18. The government of Bangladesh as well as NGOs and International organizations should take many policies and programs to improve reproductive health issues.

19. Raise awareness among women and clinicians, including an information campaign, that abortion legislation allows women to seek safe abortions at health centres.
20. Strengthen and expand efforts to increase knowledge and access to affordable contraceptive methods and emergency contraception throughout the country and ensure that women and girls, especially in rural areas, do not face barriers accessing family planning information and services.
21. Establish national maternal and safe-motherhood sensitisation programs for rural communities and women who have limited education, and ensure that programs are in local languages. Take advantage of community radio stations to disseminate safe motherhood programs in local languages in rural areas.
22. Strengthen the health-care systems—build more health facilities to reduce distances in accessing them; train and recruit adequate medical personnel; improve road infrastructure, particularly in rural areas, to ease transport challenges to health facilities.

7.8 Conclusion

Reproductive health is an emerging issue in Chittoor district as well as in the nation. The study concludes that acceptance of antenatal check up during last pregnancy have the greatest potentiality to enhance the women reproductive health behaviour. Based on the result of the study, the level of reproductive health practice of the married women was not satisfactory. In our study, although 86% respondents are educated, but they are completely dependent to their husband for financial support. The study results ensure unawareness of the respondents about the proper age of first issue. Respondent's occupation, monthly family income, age at first issue and number of children have indirect significant effect on antenatal check up during last pregnancy.

The study concludes that age at marriage and family planning acceptance has the potential to enhance women's reproductive health rights. Based on the empirical results of the study, the level of women's reproductive health rights was not satisfactory at the household level. In contrast, the traditional beliefs, attitudes and practices of the studied population are deeply entrenched in the women's lives and they hinder their reproductive health rights. To move forward, some concrete steps need to be undertaken by the major intervening agencies, namely GOs, NGOs, women's organizations and other stakeholders (private initiatives, civil society, etc.) aiming at stimulating the process of women's reproductive health rights. Interventions should be in the nature of legislative processes, planning, programming or structural steps to provide greater

opportunities for the sustainable development of women at all levels and to reduce discriminatory practices against women, as well as all types of gender-based stereotypes.

Women's reproductive health is significant not only for women's health, but for the health of future generations. Women's health prior to and during pregnancy can impact their lifelong health outcomes, as well as their children's growth and development. In rural areas it is critical that we ensure access to contraception and comprehensive reproductive services to reduce the increasing rates of sexually transmitted diseases, reduce unintended pregnancies, and ensure healthy maternal and infant outcomes. Women often need to use the health care system more than men and face higher health care costs, but they are more likely to be poor, unemployed, work part-time or in other positions that do not offer benefits such as health insurance. Removing financial barriers to services, such as reproductive health, maternal health care, and screenings for cancer, diabetes, hypertension and heart disease, can help to ensure that women are receiving adequate and appropriate levels of care.