



**A STUDY TO ASSESS THE HEALTH SEEKING BEHAVIOUR OF WOMEN IN THE
REPRODUCTIVE AGE GROUP REGARDING REPRODUCTIVE TRACT INFECTIONS IN
SELECTED AREAS OF INDORE, M.P.**

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Introduction

Women play a key role in maintaining the health and well-being of their communities. Traditionally, the health of families and communities is linked to the health of women. The illness or death of a woman has serious and far-reaching consequences for the health of her children, family and community.

Reproductive tract infections are infections of the genital tract. They affect both women and men. Some STIs (such as syphilis and gonorrhea) are sexually transmitted, but many are not. In women, an overgrowth of endogenous microorganisms commonly found in the vagina can cause RTI (yeast infection, bacterial vaginosis). Medical interventions can induce iatrogenic infection in several ways—endogenous organisms from the vagina or sexually transmitted organisms in the cervix can be pushed into the upper genital tract during a transcervical procedure and cause serious infection of the uterus, fallopian tubes, and other pelvic organs. Organisms from outside the body can also be introduced into the upper genital tract during medical procedures if infection control is poor. In men, sexually transmitted infections are much more common than endogenous or iatrogenic infections.

A woman's reproductive or childbearing years are potentially rich and rewarding and have a huge impact on her overall health and well-being. The health of women of reproductive or childbearing age (between 15 and 49 years) is relevant not only for the women themselves, but also has an impact on the health and development of the next generation. The WHO highlighted the importance of women's multiple contributions to society, in their productive and reproductive roles, as consumers and equally important as primary caregivers in the family.

Objectives

1. Assess the health seeking behaviour of women in the reproductive age group regarding reproductive tract infections.
2. Find out the prevalence of reproductive tract infections among women in the reproductive age group.

3. Find out the association between reproductive tract infections and health seeking behaviour among women in the reproductive age group.
4. Find out the association between health seeking behaviour regarding reproductive tract infections and selected variables.

Hypothesis

H1: There is a significant association between health seeking behaviour and reproductive tract infections among women in the reproductive age group.

H2: There is a significant association between health seeking behaviour of women in the reproductive age group with selected variables.

Methods and Material

A non-experimental approach is used in the present study as the purpose is to assess the health seeking behaviour of women in the reproductive age group regarding reproductive tract infections. Research design consists of blueprint for the collection, measurement and the analysis of data. The design selected for the present study was a cross sectional survey design.

The study is conducted in selected areas of Indore, M.P. The setting was selected based on the familiarity of the setting and feasibility of getting sample. Women in the reproductive age group of 18-45 years in selected areas of Indore, M.P. Sample is the subset of the population selected for a particular study. Sample for the present study consist of 200 women of selected areas of Indore M.P. and sampling technique adopted for the study was non probability Purposive sampling.

Result

The result 36% of participants belonged to the age group of 18-27 years, 47.5% participants have higher secondary education, 67.5% participants were homemakers and 52.5% of them have monthly income of <Rs 1500/. 74.5% of the participants were belonged to Islam religion, 62.5% participants belong to nuclear family, 74% participants were married and 18.5 % participants were nullipara. 15.5% of the participants have history of chronic illness and among them, 54.8% of them are diabetic and 35.4% are hypertensive and all of them are RTI.

Among 133 participants, 52.6% have history of vaginal discharge with foul smell as symptom, 92.5% sought treatment. History of RTI symptoms lasts for weeks in 41.35% participants, 50.4% of them took allopathy as treatment. 44.36% did diagnostic test with regard to RTI and among them 107.2% participants done urine test.

Conclusion

The present study was conducted to assess the health seeking behaviour of women in the reproductive age group regarding reproductive tract infections, in selected areas of Indore M.P. It was found that among 200 participants, 71% were found to have symptoms of RTI and among them, 46.5% were taking treatment for RTI symptoms. Only 29% of

participants maintained good health seeking behaviour and 71% were maintaining moderate health seeking behaviour and among 66.5% of participants with a previous history of RTI, 87.3% of the participants have an excessive amount of vaginal discharge and 60.5% of them have vaginal itching. It was found that 33% of participants have a moderate prevalence of RTI symptoms and none of them have a high prevalence of RTI. It was also found that there is no significant association between health seeking behaviour and reproductive tract infection and there is a significant association between health seeking behaviour and occupation, marital status and parity of women in the reproductive age group. Study findings also show that there is no association between health seeking behaviour and other socio-personal variables like age, education, income, religion, family type and prior information. Analysis of the study revealed that there is a significant association between health seeking behaviour and type of chronic illness, mode of treatment to previous RTI, and recurrence of RTI among women in the reproductive age group and there is no association between health seeking behaviour and other clinical variables like the history of chronic illness and treatment taken, previous history of RTI, its treatment taken, duration of illness, family history of RTI and treatment taken by a family member.

REFERENCE

1. The United Nations Children's Fund. Adolescents: An Age-old opportunity.
2. Enid Elizabeth Thomas, Jayasree Ananda bhavan Kumaran. Prevalence of genital infections among women in reproductive age group in a rural area in North Kerala. *International Journal of Community Medicine and Public Health*. 2019 Jul;6(7):2996-3002. DOI: <http://dx.doi.org/10.18203/2394-6040Z.ijcmph.20192841>.
3. Westrom LV. Sexually transmitted diseases and infertility. *Sex Transm Dis* 21: 532- 537, 1994
4. Cdc.gov. Available from: <https://www.cdc.gov/reproductive health/ womensrh/ index.html>
5. National Guidelines on Prevention, Management and Control of Reproductive Tract Infections Including Sexually Transmitted Infections. [Last accessed on 2016 Jul29]. Available from: http://www.naco.gov.in/upload/STI%20RTI%20services/National_Guidelines_on_PMC_of_RTI_Including_STI%201.pdf.
6. World Health Organization. Global incidence and prevalence of selected curable sexually transmitted infections – 2008 [Internet]. 2014 [cited 2019 Jul 08].
7. Delhi N. Ministry of Health and Family Welfare; 2010. Ministry of Health and Family Welfare. Indian Public Health Standards (IPHS) for. 2010:101-200.
8. IIPS and Macro International, National Family Health Survey (NFHS-3), 2005- 06: India, vol. 1, IIPS, Mumbai, India, 2007.

