4 Social Sciences



4.1 Men's participation in reproductive and sexual health

4.2 Study of population growth and health status among 'Kamars' a primitive tribe of Raipur district of Chhattisgarh.

4.1 Men's participation in reproductive and sexual health

An Investigation among the primitive tribes of undivided Madhya Pradesh

Dr. Kalyan Brata Saha

Status : Ongoing project (June 2004 - December 2006)

Funding Agency: ICMR (Extramural)

Objectives

1. To generate baseline data on men's knowledge, attitude and practice/participation in different aspects of reproductive health (such as on RTI/STI/HIV/AIDS, Family Planning, Antenatal Care, Sexual health, Quality of Government health services and Reproductive health needs). Survey also aims to record self-reported symptoms of RTI.
2. To develop need-based men oriented IEC and make intervention of the same in the study villages by adopting a quasi-experimental research design.
3. To study the impact of IEC by undertaking resurvey in the intervention and control villages.

Methodology

So far first phase survey is completed and designing of IEC is in progress. The survey is conducted among the 400 currently married males in the age group 15-40 years belonging to primitive Baiga tribe of Baigachak area of Dindori district by canvassing a pre-designed interview schedule. The sample covered is located in 19 villages spread over three blocks of the district. Designing of IEC is in progress. The IEC intervention will be made in the 50% of the sample villages selected randomly to bring about homogeneity in the intervention and control group. Resurvey will be done in 50% of the studied households to see the effect of intervention. Some of the key indicators generated in the baseline survey are mentioned below:

Salient findings

Basic characteristics of the sample

The mean age of the respondents is 29.0±7.4 years. About 61% of the males are literate and most of them were primary educated. About 16% among them are non-formally educated. Overwhelming majority of them are unskilled laborers. Very narrow inter-spouse age difference is noticed (1.6 years). The mean household size is 5.4±1.91.

Aware of RTI/STI/HIV/AIDS

About 18% men were aware of RTI, while awareness for STD was 21.5%. Only 10 % have heard about HIV/AIDS and most of them have no knowledge of its transmission and prevention. Mean age at first intercourse and first marriage is estimated to be17.8±3.43 and 18.0±3.32 respectively, suggesting prevalence of premarital sex relationship among them. Further, about 5% strongly favour extramarital sex. Less than 1% of the males ever used condom during sexual intercourse. Results of multivariate logistic regression model suggest that education and knowledge of use of condom has positive and significant association with the awareness of RTI and STI. Further the model suggests that those are having children and younger male are better aware of RTI and STI.

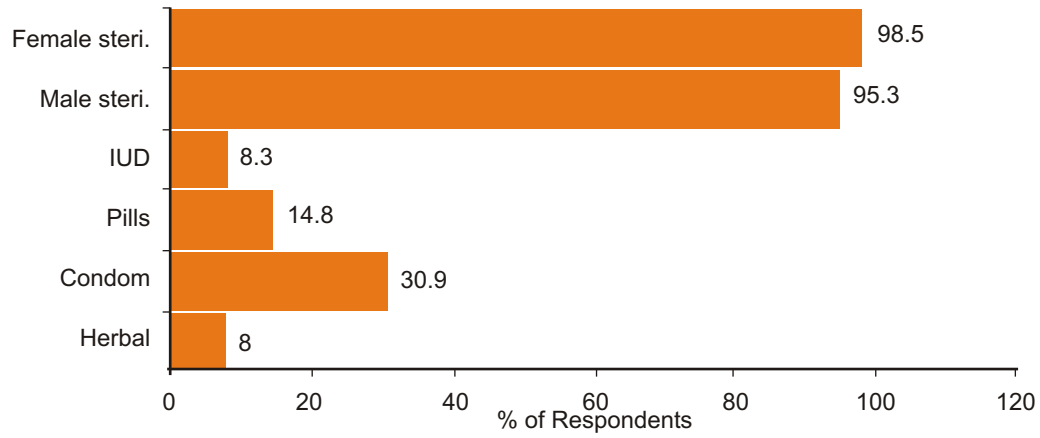
Children ever born and family planning

Both ideal and actual family size is positively and significantly associated with age of the respondents. Further the ideal family size of 3.62±1.09 exceeds their actual family size (i.e. children ever born and surviving) 2.77±1.99. Thus, they are not concerned about family planning. Majority of them (84%) were aware of family planning. Method specific awareness to family planning is mentioned in figure 4.1.1. Current contraceptive prevalence rate is 35% and mostly female sterilization. They are yet to develop the proper concept of birth spacing.

Antenatal care and under 5 child mortality

About 32% of them were having some information about antenatal care during pregnancy. Among them only 32% of the respondents' wives received TT injection and iron and folic acid tablets during their last pregnancy. About 13% also reported that their wives had abdominal check-up by the health workers. All the deliveries were made at home by untrained "dai".

Fig. 4.1.1 : Method specific awareness to family planning



Respondents numbering 174 (44%) experienced one or multiple child death under 5 years of age. The mean mortality experienced was 1.62±0.85. Male child mortality (1.36±0.70) was slightly higher than female child mortality (1.30±0.58). However, no specific trend could be established between order of death and gender of the child.

There are many misconceptions about sexual problems. About 73% of the respondents did not avail any Government health facilities for any health problems during preceding 12 months of survey. The main reasons mentioned were not felt need (88%) and health posts not conveniently located (30%).



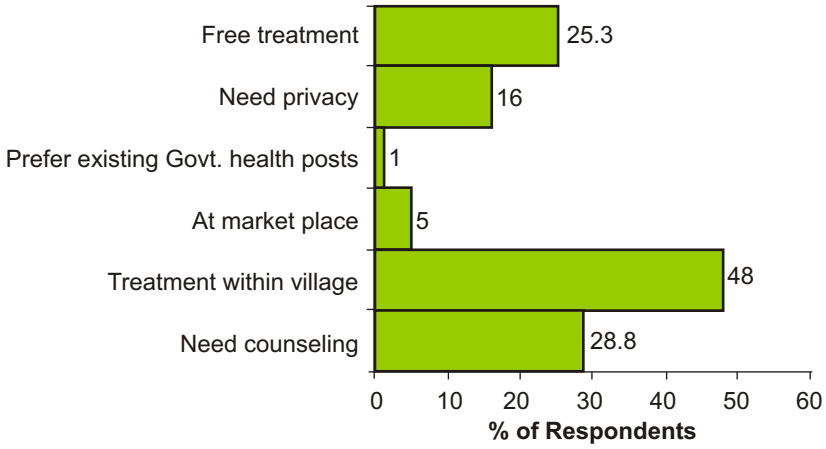
A Baiga Man

Felt need for reproductive health problems

Merely 62% of the respondents felt need for their reproductive health problems and gave multiple responses. The perceived needs are mentioned in figure 4.1.2.

The figures definitely point to the poor participation of male in reproductive health matters and needs immediate intervention of men oriented IEC to generate a demand for services. The study is in progress.

Fig 4.1.2 Perceived need for reproductive health problems



4.2 Study of population growth and health status among 'Kamars' a primitive tribe of Raipur district of Chhattisgarh.

Dinesh Kumar, Dr. C. K Dolla

Status : Ongoing project (May 2004 - April 2007)

Objectives :

1. To study the various population growth and fertility parameters in context to the national scenario to explain the extinctive nature of the primitive tribes.
2. To study the demographic profile reflecting the vital events and their statistics such as various mortality pattern.
3. To study the maternal and child health care practices.
4. To study the general health status of the study individuals.

Methodology

The study is being carried out in Kamar tribe of Raipur district of Chhattisgarh. About 1000 household will be covered to collect socio-demographic information, status of maternal and child health etc. General health status will be determined by recording detailed history and by physically examining the study individuals. A total of 99 households were surveyed in six villages, patients were physically examined.

Salient Findings

The average size of household was 4 persons. It was found that 43% of Kamar population was below 15 years of age, 52% in 15-59 age group and 4% above 60 years of age.

About 70% women had received antenatal care. Of these, about 18%

women consulted private doctor, 24% women to Govt. doctor and 58% women to ANM for antenatal care services (Fig 4.2.2).

Of the 119 individuals clinically examined, 31 had upper respiratory infection, 5 had diarrhea and 4 had chronic bronchitis.

Fig. 4.2.1 Age & sex distribution



Fig. 4.2.2 Source of antenatal care

