

UNOCCUPIED SPACE IN KNOWLEDGE OF REPRODUCTIVE RIGHTS AMONG ACADEMICIANS- A CRITICAL ANALYSIS

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Abstract

Gap in knowledge of reproductive rights causes the misperception and negative attitude towards women health. Diminished status regarding reproductive rights causes barrier to the development of a nation. People believe that the educational status of a person decides the knowledge of reproductive right. But in practical, the educated persons are less clear about core issues of reproductive rights. Though reproductive rights are basic human rights, its practice among women is still a question mark. Therefore education on reproductive rights is significant and needs to be addressed. The present research was carried out among 32 teachers working in different colleges in India and it was analyzed through mean, standard deviation, chi-square, ANOVA and factor analysis. The result revealed that education helps very little in gaining knowledge on reproductive rights.

Key words: Academicians, Knowledge, Reproductive rights, Status.

Introduction

Reproductive rights respite on "the right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children, to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health; including the right to make decisions concerning sex and reproduction free of discrimination, coercion and violence". Gender disparity is important factors which deny women of their reproductive rights. Sexual rights are an important part of reproductive rights which include "The right to sexual freedom, autonomy, integrity, and safety of the sexual body. It also includes the right to sexual privacy, equity, sexual pleasure, emotional sexual expression, the right to sexually associate freely, right to make free reproductive choices, education and the right to sexual health care". In Pakistan, women are deprived in meeting their sexual needs and in freedom of choice of their partners, which has implications for women's reproductive behavior and human rights. This gender inequality decreases women's ability to have a healthy sex life, and increases their risk of violence and mental disorders. The present research discusses about the knowledge of academicians on reproductive rights.

Review of Literatures

Barbara Klungman (2004) in their study entitled 'Organizing and Financing for Sexual and Reproductive Health and Rights: The Perspective of an NGO Activist Turned Donor' discussed about the successes and challenges followed by the ICPD, Cairo 1994. It calls for a focus on implementation of services within public health and education systems, the need to deepen the capacities of activists and build new leaders, and the value of alliances with other movements whose goals are also being challenged by macro-economic forces and fundamentalist movements. The study suggested that at national level monitoring public sector spending, strengthening public health system capacity for implementation, and advocacy and community organization to enable shifts in public understanding of sexual and reproductive rights.

Caroline Davey (2005) in their study entitled 'Sexual and Reproductive Health and Rights in the United Kingdom at ICPD+10' has described that the gender equality, equity and empowerment of women and provided access of safe abortion services, STI prevention and treatments. The study mainly focused what are achievements have gained through ICPD in United Kingdom. It was reviewed in UK that greater attention has been paid to sexual health at a national policy level, including strategies on teenage pregnancy and sexual health, but there is still a long way to go and new recommended standards for sexual health and HIV services have been developed.

Francoise N. Hamlin (2005) in their study entitled 'Women of Color and the Reproductive Rights Movement by Jennifer Nelson' described that the feminist organizations and international mechanisms of women's focused in the movements to secure women reproductive rights during 1960s- 1980s. It found that reproductive movements generally associated with a white feminist agenda. It goes beyond the black/white binary by including women's activism in the (Puerto Rican) Young Lords Party as well as in the Black Panther Party. Rather, activism must focus on the most vulnerable women, addressing on current welfare reform policies.

Johanne Sundby (2005) in their study entitled 'Young People's Sexual and Reproductive Health Rights' addressed about how one can meet the reproductive rights of young clients, especially females, in a human rights and reproductive rights framework, as well as in clinical practice and also safeguard their health and ensure their sexual safety. However, in developing countries, many young people are exposed to the increasing risks of unprotected sexual practice, such as exposure to HIV/AIDS, sexually transmitted diseases, unwanted or unplanned pregnancies, sexual abuse and rape, and mental health problems related to unwanted sexual exposures. Some, especially the poor and uneducated, enter into sexual activities without proper information or access to protective services.

Munirat Ayoka Ogunlayi (2005) in their study entitled 'An Assessment of the Awareness of Sexual and Reproductive Rights among Adolescents in South Western Nigeria' The study revealed that majority of the adolescents was aware of sexual and reproductive health rights but lack of knowledge about the rights. Majority of them in various categories (by school condition and type of settlement) were not aware of sexual and reproductive health programmes being implemented for adolescents. In addition, those who were aware of such intervention programmes could not access or use the services due to certain socio cultural barriers. The study recommends formulation of appropriate intervention strategies and programmes for adolescents so that they may be aware and knowledgeable of their sexual and reproductive rights.

Pascale A Allotey et al., (2011) in their study entitled "Sexual and reproductive health and rights in public health education" addresses the key issue challenges faced in mainstreaming the teaching of sexual and reproductive health and rights into public health education. A case study design was used to explore sexual and reproductive health and rights programs, focusing specifically on tertiary institutions that offer public health training within our regional contexts. The findings were analyzed using qualitative research. It is time to encourage more comprehensive and multidisciplinary integration of sexual and reproductive health and rights into public health

education. There is increasing debate and awareness about the need for a 'public health workforce' that has the skills to be more responsive to current global and regional health challenges. Without question, sexual and reproductive health and rights need to be fully integrated into the relevant training.

Problem Formulation

Reproductive rights are recent talking issues among educated and uneducated person. Those who get proper sex education they can easily access their rights. Every right has certain loopholes with correct knowledge which can be enhance in future. Earlier studies revealed that educated women can easily access their rights in all spheres, but in reality women do not come forward to raise question about their reproductive rights. This study mainly focuses on knowledge about reproductive rights among college teachers.

Objectives of the study

- To study the personal profile of respondents
- To know the knowledge of reproductive rights among academicians
- To identify barriers to access reproductive rights
- To analyze the relationship between personal profile and status of reproductive rights among academicians

Methodology

The present study was conducted in empirical manner among college teacher in India. It includes both primary and secondary data. After through review of literature the tool was developed and it was adopted to collect primary data from different college teachers. It consists of questions related to personal profile and reproductive rights. The data was collected from 32 respondents through convenient sampling. Secondary data was collected from the books, journals and related websites. The data was analyzed through different statistical tool like mean, standard deviation, chi-square test and correlation.

Sampling

The data was collected from 32 academicians who are attended 21 days refresher course in academic college of Bharathiar University, Coimbatore District during the month of July 2015. Teacher from various institutes of India was attended in the course and the data was collected from the participants (academicians).

Validity and Reliability

A pre-test was conducted to validate the questionnaire. The data have been randomly collected from 32 respondents and Cronbach's Alpha Criterion was applied to test the reliability of the tool. The value determined is 0.691 proving the reliability of the instrument. Based on the pre-test study, the tool was modified and finalized.

Reliability Statistics

Cronbach's Alpha Based on Standardized Items	N of Items
.691	26

Scope of the Study

The study is confined to the in equal status of reproductive rights among academicians. The study has been conducted from the point of view of college teachers from different disciplines. The study also made an attempt to gain the knowledge about reproductive rights among educated women. The data was collected during 21.07.2015 to 28.07.2015.

Results of the study

Primary data like age, education, type of job, discipline, monthly income, type of family, religion, community, age at marriage, number of children and number of spacing between the children was collected from 32 respondents and the result is given in the table1.

Table 1
Personal Profile of the Respondents'

Responses/ Variables	Categories					
Age	21-30 years 2 (6.3%)	31-40 years 13(40.6%)	41-50 years 12 (37.5%)	Above 51 years 5(15.6%)		
Education	Ph.D 15 (46.9%)	M.Phil 13 (40.6%)	P.G , M.Ed 1(3.1%)	Other 3 (9.4%)		
Type of job	Government 29 (90.6%)			Private 3 (9.4%)		
Discipline	Arts 19(59.4%)	Science 11 (34.4%)	Others 02 (6.3%)			
Monthly Income	<=25,000 1 (3.1%)	25001-35000 9 (28.1%)	35001-45000 13 (40.6 %)	Above 45000 9 (28.1%)		
Type of Family	Nuclear 22 (68.8%)			Joint 10 (31.3%)		
Religion	Hindu 27 (84.4%)	Muslim 3 (9.4%)	Christian 2 (6.3%)			
Community	SC/ST 6 (18.8%)	MBCn4 (12.5%)	BC 16 (50%)	FC/General 6 (18.8%)		
Age at marriage	Less than 18years 2 (6.3%)	18-21 years 1 (3.1%)	22-25years 10 (31.3%)	Above 25 years 19 (59.4%)		
Number of children	None 5 (15.6%)	One 14 (43.8%)	Two 12 (37.5%)	Three 1 (3.1%)		
Number of spacing between the children	No child 5 (15.6%)	One child 14(43.8%)	<one year 4(12.5%)	1-4 years 7 (21.9%)	5-8 years 1 (3.1%)	Above 8 years 1(3.1%)

Source: primary data

It is observed from the table that 40.6% of the respondents in the age group of 31-40 years. 46.9 percent of the respondents completed doctoral degree. 90.6 per cent of the respondents worked in government sector. 59.4 per cent of the respondents working in arts discipline. 40.6 percent of the respondents' monthly income was between 350001-45,000Rs per month. 68.8 per cent of the respondents belong to nuclear family. 84.4 percent of the respondents were Hindus. 50 percent of the respondents belong to backward community. 59.4 per cent of the respondents married above 25 years. 43.8 percent of the respondents like small family norms they have only one child. Majority of the respondents have one child and number of spacing between the second child most was almost 1-4 years 21.9 percent.

Table 2
Information about Reproductive Rights

Slno	Particulars	Yes	No
1	Do you know the reproductive age of women	7 (21.9%)	25 (78.1%)
2	Have you heard about women rights	24 (75%)	8 (25%)
3	Have you heard about reproductive rights	13 (40.6%)	19 (59.4)
4	women rights and reproductive rights are different	22 (68.8%)	10 (31.3%)
5	Have you heard about MTP (Medical Termination of Pregnancy) act	13 (40.6%)	19 (59.4%)

Source: primary data

The data was collected from teachers who are working in college level but table 2 shows that 59.4 percent of the respondents were new to the term 'reproductive rights'. 78.1 percent of the respondents did not know the reproductive age of women. 68.8 percent of them said that there is some difference between women rights and reproductive rights. Government gave many kind of awareness about foetus termination but here 59.4 percent of the respondents are new to MTP act. The findings of the study shows light on darkness out of 32 respondents only one respondent was able to clearly state that MTP is medical termination of pregnancy. Hence it is very clear that whether women are educated or uneducated working or non working, there is a need to create awareness among them to know their reproductive rights to make them fit into their healthy life.

Table 3
Knowledge about Reproductive Rights

There are 26 questions related to reproductive rights were asked to the respondents which has three points like Agree, Neutral, Disagree. The respondents were gone through and ticked the most appropriate one the result is presented in the table 3.

Slno	Description	Mean/SD
1	Female infanticide is a crime against women under reproductive rights	High Mean score : 2.8750
2	Maternity leave only for women	Low mean score: .20000
3	Maternity leave applicable only after delivery/miscarriage	High SD : .89578
4	Female infanticide is a crime against women under reproductive rights	Low SD : .33601

Source: primary data

It is observed from the table 3 that the statements 'female infanticide is a crime against women under reproductive rights' has high mean score (2.8750) and lowest standard deviation (.33601) which shows that academicians are aware about female infanticide and its legal impact. Organized sector provides maternity leave for women (180 days from the day of delivery) and paternity leave 15 days for men. To assess the respondents' knowledge regarding maternity leave the question on maternity leave was asked to the respondents. The statement 'maternity leave only for women' has low mean score (.20000) and the statement 'Maternity benefits applicable only after delivery/miscarriage' have high standard deviation (.89578). The score (low mean score and high SD) of the respondents' reveals that their knowledge about maternity/paternity leave not clear.

Table 4
Summary item statistics

	Mean	Range	Maximum / Minimum	Variance	N of Items
Item Means	2.581	.875	1.438	.064	26
Inter-Item Correlations	.079	1.245	-1.249	.046	26

Source: primary data

The table 4 shows that inter-item correlation of 26 variables, it revealed 2.581 mean value, .875 range, .064 variance between and .079 inter item correlations between the 26 variables. It revealed that the relationship between the items was positively correlated.

Table 5
Personal Profile and Reproductive Rights

In order to find the relationship between respondents personal variables like age, education, type of job, discipline and religion (was considered as independent variables) and knowledge about reproductive rights the following null hypothesis was formulated and tested by using chi-square test. The result is presented in the table 5.

H₀: There is no significant relationship between independent variables and reproductive rights

Sl no	Independent variables(s)	Dependent Variable(s)	P value	df	Sig.
1	Age	Knowledge about MTP act	26.051	12	.011**
2	Education	Knowledge about Reproductive age	8.054	3	.045**
3	Education	Heard about MTP act	9.507	3	.023**
4	Education	Knowledge about MTP act	28.812	12	.004**
5	Type of job	Knowledge about Reproductive age	3.886	1	.049**
6	Religion	Children spacing	18.159	0	.052**

Source: primary data NB: MTP: medical termination of pregnancy

**5% level of significance

The result revealed that there is significant relationship between age and respondents' knowledge about MTP act. Education plays a vital role in reproductive rights therefore respondents' education and knowledge about reproductive rights, heard about MTP act, information about MTP act were significant at 5% level the null hypotheses was rejected.

All religions following their own traditions regarding puberty, marriage and children birth depends on that they decide girls' age at marriage and number of children the study found there is significant relationship between religion and number of years spacing between children at 5% level hence the null hypothesis rejected.

Table 6
Association between Independent and dependent variables

An attempt has been made in the study to find the relationship between personal information and variables related to in equal status of reproductive rights based on that the following hypothesis was framed and tested with chi-square test it is given in the table 6.

Null hypotheses H_0 : there is no significant relationship between independent variables and dependent variables

Sno	Independent variables	Dependent variables	Chi- square valve 95% level of significance	df	H_0
1	Discipline	Heard about reproductive rights	.864		<i>All hypotheses was accepted</i>
2	Discipline	Do you know the reproductive age of women	.265		
3	Discipline	Have you heard about MTP (Medical Termination of Pregnancy) act	.537		
4	Discipline	Heard about women related rights	.502		
5	Religion	Heard about reproductive rights	.450		
6	Religion	Do you know the reproductive age of women	.513		
7	Religion	There is some difference between women rights and reproductive rights	.418		
8	Religion	Heard about women related rights	.432		
9	Type of family	Knowledge about reproductive age of women	.272		
10	Type of family	There is some difference between women rights and their reproductive rights	.355		
11	Type of family	Have you heard about MTP (Medical Termination of Pregnancy) act	.467		
12	Type of family	Heard about women related rights	.186		

Source: primary data

It is inferred from the table 6 that there is no significant relationship between respondents discipline and heard about reproductive rights, do you know the reproductive age of women, there is some difference between women rights and their reproductive rights and heard about MTP (Medical Termination of Pregnancy) act. There is no significant relationship between respondents religion and heard about women related rights and heard about MTP (Medical Termination of Pregnancy) act. There is no significant relationship between respondents type of family and do you know the reproductive age of women, there is some difference between women rights and their reproductive rights, heard about MTP (Medical Termination of Pregnancy) act and heard about

women related rights. Hence the null hypothesis is accepted and the study found that there is no relationship between the above given independent and dependent variables.

Table 7
Relationship between age and knowledge about reproductive rights
Result of ANOVA

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	2.667	1	2.667	4.248	.048**
Within Groups	18.833	30	.628		
Total	21.500	31			

Source: primary data, **significant at 5% level

The above table 7 revealed that there is significant association between age and respondents knowledge about reproductive rights at 5% level of significance. It revealed that respondents' age plays a vital role getting information about reproductive rights.

Factor analysis

Factor analysis has been done to reduce the variables in small factors regarding women health, rights, and maternity benefits. It is given in the following tables 8, 9, 10, 11. The variables was converted into four factor like Women right to access reproductive rights and sources, Maternity benefits for women reproductive rights, Legal support for women reproductive rights, Women education and reproductive rights by using rotated component matrix of factor analysis.

Table 8
Women right to access reproductive rights and sources

Slno	Descriptions	RCM-Rescaled component value
1	Education creates awareness on women's reproductive rights	.711
2	Peer interaction plays important role access knowledge about reproductive rights	.828
3	Reproductive rights is a basic fundamental rights for women/girls	.710
4	Educated women's access to reproductive rights is easier	.666
5	Women have the right to access to reproductive rights	.713

Based on rotated component matrix value there are five variables were included in the first factor women rights to access reproductive rights and sources of getting information about reproductive rights. The respondents reported that peer group plays a vital role to get knowledge about reproductive rights, women have the rights to access reproductive rights under law, education create awareness, reproductive right is basic right for women and educated women can easily access their reproductive rights

Table 9

Maternity benefits for women reproductive rights

Slno	Descriptions	RCM-Rescaled component value
1	Maternity benefit applicable for working women in organized sector	.775
2	Maternity leave can be availed only for women	.674
3	Women in rural areas are not aware about reproductive rights	.837
4	Maternity benefit act comes under reproductive rights	.861
5	Maternity leave is 180 days after delivery	.799
6	Maternity leave applicable only after delivery/miscarriage	.964

Question related to maternity benefit were asked to the respondents the variables (six) related to the key factor was summarized in the second factor. It resulted that most of the respondents reported that maternity benefit act comes under reproductive rights, rural women not aware about reproductive rights, Maternity leave applicable only after delivery/miscarriage but it is applicable for working women in organized sector, most of the respondents does not aware about duration of maternity leave (180days after delivery) and paternity leave for men.

Table 10**Legal support for women reproductive rights**

Slno	Descriptions	RCM-Rescaled component value
1	Reproductive rights are in favor of women's health	.582
2	Family members responsible to teach girls about reproductive rights	.709
3	Government provides reproductive rights awareness	.776
4	18 years is legal age of marriage of girl	.834
5	Population control concept comes under reproductive rights	.883
6	Reproductive rights helps in women progress	.547
7	Women have the choice of freedom in decision making about number of children	.784
8	Child marriage restraint act helps girls education	.510

Third factor included the statements related to legal support for women reproductive rights it resulted that child marriage restraint act helps girls education, Reproductive rights are in favor of women's health in particular cases, Reproductive rights helps in women empowerment, government provides reproductive rights awareness, women have the choice of freedom in decision making about number of children. Family members responsible to teach girls about reproductive rights, a girl getting married after the age of 18 is good for health, population control concept comes under reproductive rights.

Table 11

Women education and reproductive rights

Slno	Descriptions	RCM-Rescaled component value
1	Lack of knowledge about reproductive rights increases maternal mortality and infant mortality rate	.762
2	Educated women are having good knowledge about reproductive rights	.504
3	nuclear family helps to get more knowledge of reproductive rights	.709

Remaining variable included in to fifth factor of analysis it has three attitude related to women education and reproductive rights. The result indicated that Lack of knowledge about reproductive rights increases maternal mortality and infant mortality rate, nuclear family helps to get more knowledge of reproductive rights, educated women are having good knowledge about reproductive rights.

Conclusion

Reproductive rights are personal law for women to choose their life partner, number of children and access their rights in reproductive matters. Education is the important source to get knowledge about law. Majority of educated women are aware about their rights but they do not come forward to raise their opinion in the society. Therefore utilization of reproductive rights among educated women is still under vigilance. However when an individual is supported by family system, the possibility of educated women coming forward to utilize their rights is possible.

References

- Abdulkarim Garba Mairiga et al (2012) 'Nigerian Lawyers and Reproductive Health Rights: A Survey of Knowledge, Practices and Opinions on Law Reforms among the Bar and Bench in North Eastern Nigeria' *African Journal of Reproductive Health* 2012; 16[1]:69-74).
- Ali **Faridah A** 'Association of various reproductive rights, domestic violence and marital rape with depression among Pakistani women' *BMC Psychiatry* available at <http://www.biomedcentral.com/1471-244X/9/77>
- Brolan Claire E and Hill Peter S (2014) 'Sexual and Reproductive Health & Rights in the evolving post 2015 Agenda: Perspectives from key players from multilateral and related agencies in 2013' *Reproductive Health Matters*, 2014 May; 22(43):65-74.
- G. Sen and S. Batliwala 'Empowering Women for Reproductive Rights', England, Oxford University Press, 2000. Pp 15-36. Downloaded from <http://www.poline.org/node/256863>
- Hardon Anita & Hayes Elizabeth (1997) *Reproductive Rights in Practice: A Feminist Report on Quality of Care*, London, Zed Books Ltd
- Nandi Sulakshana et al. 'Public health advocacy to reinstate reproductive rights of Particularly Vulnerable Tribal Groups (PTGs) in Chhattisgarh' *BMC Proceedings* 2012, 6 (Suppl. 5): P1 available at <http://www.biomedcentral.com/1753-6561/6/S5/P1>
- Pascale A Allotey et al., (2011) 'Sexual and reproductive health and rights in public health education' *Reproductive Health Matters* 2011; 19 (38):56-68 www.rhmjournal.org.uk
- Pillai Vijayan K. and Gupta Rashmi 'Reproductive Rights Approach to Reproductive Health in Developing Countries' *Global Health Action* 2011, 4: 8423 - DOI: 10.3402/gha.v4i0.8423

Sen Sujata (2013) *Women Rights and Empowerment*, New Delhi, Astha Publishers and Distributors

Teresa Castro Martin and Fatima Juarez (1995) 'The impact of Women's Education on fertility in Latin America: Searching for Explanations' *International Family Planning perspectives*, 21:52-57& 80, 1995

Titilayo Cordelia Orisaremi and Ogoh Alubo (2012) 'Gender and the Reproductive Rights of Tarok Women in Central Nigeria' *African Journal of Reproductive Health* 2012; 16[1]:83-96).