

Awareness of rural adolescents on sexually transmitted diseases

Dr. P. DEVI

Assistant Professor
School of Social Sciences & Humanities
B.S. Abdur Rahman University
Chennai, India

Abstract:

In recent years, there has been growing recognition of the sexual and reproductive health problems faced by adolescents. A large number of adolescent girls are facing the risk of unplanned pregnancies, sexually transmitted infections and unsafe abortions. Most of the sexually active adolescents are frequently unprepared to protect themselves from unwanted pregnancy or infections. Further, adolescents are lacking access to adequate information and comprehensive reproductive health services. The reproductive health problems such as early pregnancy, increased premarital sexual activity and limited knowledge regarding reproductive health all result in increased risk of RTI and STD infection including HIV/AIDS, maternal morbidity and mortality. Awareness of Sexually Transmitted Diseases (STDs) was generally poor among adolescents. Specific knowledge of AIDS and its mode of transmission were very limited and misconceptions were widespread.

Key words: Adolescent mothers, Knowledge, Reproductive health & Awareness

1. Introduction

In India, traditionally the transition from childhood to adulthood among females has tended to be sudden. On the one hand, as a result of the poor nutritional status of the average Indian adolescent, there is evidence that menarche occurs later than in other regions of the world, particularly in developed nations; therefore, the biological onset of adolescence may be later in India than elsewhere. On the other hand, marriage and consequently the onset of sexual activity and fertility occur far earlier in India than in other regions of the world, thrusting adolescent females early into adulthood, frequently soon after regular menstruation is established and before physical maturity is attained (Shrireen and Jejeebhoy, 1996).

Adolescent's reproductive health shows that sexuality among young people is considered a taboo subject. Since awareness about sexually transmitted diseases is still low young people particularly have no access to adequate sex education; they are not being prepared to look after themselves (Khan, 2001).

The reproductive health awareness was distressingly low in the rural tribal female adolescents. The awareness was found to vary from one theme to another of reproductive health. It was found to be lowest on the theme STI, HIV and AIDS. Both religion and educational status were found to produce significant main effects on reproductive health awareness (Hassan et al., 2003).

The situation of adolescent women is particularly precarious, as they tend to have limited education, skills and opportunities for employment. They have relatively poor health and limited access to good nutrition, and many are caught in a cycle of early marriage and child-bearing. Marriage adds dramatic changes to their lives that involve their bodies, emotions, and daily life experiences. These changes often occur in unfamiliar surroundings among virtual strangers, as a large proportion of marriages in India are patrilocal and arranged by family elders (George, 2003). The incidence of Sexually Transmitted Diseases (STDs) is also disproportionately high among young people. one in 20 adolescents contracts a sexually transmitted disease each year, and half of all cases of HIV infection take place among people under age 25 (Arundhati Mishra, 2002).

2. Objectives

- To assess the adolescent mothers knowledge on sexually transmitted diseases and HIV/AIDS; and
- To suggest appropriate programme strategies to meet the reproductive health needs of adolescent mothers in rural areas

3. Methodology

The study was carried out on a sample of 400 adolescent mothers aged 15-19 years selected from two districts of TamilNadu viz., Thiruchirapalli and Dindigul. After the selection of districts, one Primary Health Centre (PHC) was selected from each of the selected districts. In the next stage, two sub-centres were selected at random from the selected PHC. In the next stage, two villages were selected at random from each sub-centre. A sample of 50 adolescent mothers was selected from each village using systematic random sampling procedure. Thus the sample consisted of 200 adolescent mothers from each of the selected districts. In all, 400 adolescent mothers were selected from the two districts of Tamil Nadu.

Results and Discussion

AWARENESS OF SEXUALLY TRANSMITTED DISEASES

4.1 Sources of knowledge about sex

The percent distribution of adolescent mothers by sources of knowledge about sex is presented in table 4.1. Mass media plays a vital role in imparting knowledge about sex and other related issues. The results showed that television was the main source for obtaining information about sex as reported by 45.5 per cent of adolescent mothers. Siblings were the next major source as reported by 33.3 per cent. Husband, doctor and SHGs were reported by 24.3 per cent and radio was reported by 10 per cent.

Table 4.1 Percent distribution of adolescent mothers by their source of knowledge about sex

Source of knowledge	Number N=400	Percent
Friends	35	8.8
Television	182	45.5
Radio	40	10.0
Magazines	20	5.0
Movies	18	4.5
Parents	25	6.3
Teachers	20	5.0
Siblings	133	33.3
Others	97	24.3

* Multiple respondents

4.2 Knowledge on spreading of sexually transmitted diseases

The adolescent mothers' knowledge on the mode of transmission of sexually transmitted diseases (STD) presented in table 4.2 revealed the poor knowledge of adolescent mothers on the spread of STD even though 85 per cent of adolescent mothers were literates in the study. 55 per cent of adolescent mothers had reported sexual intercourse as the main mode of transmission of STD. Majority of adolescent mothers had also reported that it will not spread through 'being in the same room' (58.5 per cent), 'sharing food or drink' (58.3 per cent) and 'sharing clothes' (58.5 per cent).

Table 4.2 Percent distribution of adolescent mothers by their knowledge about ways of spreading sexually transmitted diseases

STD Transmission	N	Yes	Percent	No	Percent	D.K	Percent
Being in the same room	400	4	1.0	234	58.5	162	40.5
Sharing food or drink	400	5	1.3	233	58.3	162	40.5
Sharing clothes	400	4	1.0	234	58.5	162	40.5
Oral sex	400	12	3.0	226	56.5	162	40.5
Anal intercourse	400	11	2.8	227	56.8	162	40.5
Vaginal intercourse	400	220	55.0	18	4.5	162	40.5

4.3 High risk transmission

The percent distribution of adolescent mothers by their knowledge on high risk transmission of STD is presented in table 4.3. The results showed that 30 per cent of adolescent mothers had no knowledge about the high risk transmission. Majority of adolescent mothers (59.2 per cent) reported that the major risk was from 'men to women' followed by 'women to men' (10.8 per cent).

Table 4.3 Percent distribution of adolescent mothers by their view about high risk of transmission of STD

Higher risk of transmission	Number N=400	Percent
Women to men	43	10.8
Men to women	237	59.2
Don't know	120	30.0

4.4 Medical problems in men

The percent distribution of adolescent mothers' knowledge about medical problems for men when sexually transmitted diseases are not treated properly is presented in table 4.4. Nearly half of the adolescent mothers (48.5 per cent) reported that they didn't know the medical problems faced by men. 13.8 per cent reported that due to STD men will have body

wide infection. Sores and lesions were reported by 9.8 per cent. Death was reported by 9.5 per cent and sterility was reported by 7 per cent.

Table 4.4 Percent distribution of adolescent mothers by their knowledge about medical problems faced by men when STD is not treated

Medical problems	Number N=400	Percent
Sores and lesions	39	9.8
Sterility	28	7.0
Wide infection through dissemination by blood	55	13.8
Death	38	9.5
Body wide infection + Death	33	8.2
Sterility + Body wide infection	13	3.2
Don't know	194	48.5

4.5 Medical problems in women

The percent distribution of adolescent mothers by their knowledge about medical problems in women when sexually transmitted diseases are not treated is presented in table 4.5. The results showed that 46.2 per cent of adolescent mothers were not aware of any of the symptoms of STD. 21 per cent reported that it will cause body wide infection, 10.3 per cent reported that it will cause death, 9 per cent reported that it will cause sterility and 8 per cent reported that it will cause sores and lesions.

Table 4.5 Percent distribution of adolescent mothers by their knowledge about medical Problems when STD is not treated in women

Medical problems	Number N=400	Percent
Sores and lesions	32	8.0
Sterility	36	9.0
Body wide infection	84	21.0
Cervical cancer	22	5.5
Death	41	10.3
Don't know	185	46.2

4.6 Persons suffering from more serious consequences of STD's

The percent distribution of adolescent mother's knowledge about person who suffers more due to STD's is presented in table 4.6. About one fourth of adolescent mothers (24.5 per cent) reported that men suffer more than women and 22.7 per cent reported that women suffer more than men. 22 per cent of adolescent mothers also reported their knowledge of the severity of the sufferings due to STD. About one fifth of adolescent mothers were not sure about the severity of sufferings from STD among the men and women.

Table 4.6 Percent distribution of adolescent mothers by their knowledge about the person who suffer more due to STDs

Sex	Number N=400	Percent
Men by far	5	1.2
Men	98	24.5
Equal	88	22.0
Women	91	22.7
Women by far	25	6.3
Not sure	80	20.0
Don't know	13	3.3

4.7 Seeking advice

The percent distribution of adolescent mothers by source of advice when they suspected to have sexually transmitted diseases is presented in table 4.7. The results showed that 'husband' was the main source of advice as reported by 48.5 per cent of respondents. Family doctors (18.5 per cent), mother (13.2 per cent) and unknown doctors (11.8 per cent) were other sources of advice.

Table 4.7 Percent distribution of adolescent mothers by sources of advice when they suspect to have contacted STD

Person for advice	Number N=400	Percent
Mother	53	13.2
Husband	194	48.5
Friend	13	3.2
Family doctors	74	18.5
Doctor in a hospital who does not know you	47	11.8
No body and try to hide it	19	4.8

HIV/AIDS

Acquired Immune Deficiency Syndrome (AIDS) is an illness caused by the HIV virus, which weakens the immune system and leads to death through secondary infections such as tuberculosis or pneumonia. The virus is generally transmitted through sexual contact through the placenta of HIV-infected women to their unborn children, or through contact with contaminated needles (injections) or blood. HIV and AIDS prevalence in India has been on the rise for more than a decade and has reached alarming proportions in recent years. In this study, attempt has been made to assess the adolescent mothers' knowledge on HIV/AIDS, ways of transmission, ways to avoid getting HIV/AIDS, identification of HIV infected persons, cure for HIV/AIDS, availability of vaccine for prevention of HIV/AIDS and availability of treatment for longevity of HIV infected person. The results of the analysis of data are presented in this section.

4.8 Knowledge on HIV/AIDS

The percent distribution of adolescent mother's knowledge on HIV/AIDS is presented in table 4.8. About half of the adolescent mothers (50 per cent) correctly reported that it was a virus, 26.5 per cent reported it was an infection that lead to death, 18.3 per cent reported that it destroyed the immune system and only 5.2 per cent reported that it infected only human.

Table 4.8. Percent distribution of adolescent mother's knowledge on HIV/AIDS

Knowledge on HIV/AIDS	Number N=400	Percent
It is a virus	200	50.0
Infects only humans	21	5.2
Destroys the immune system	73	18.3
Infection leads to death	106	26.5

4.9 Knowledge on transmission of HIV/AIDS

The percent distribution of adolescent mother's knowledge on transmission of HIV/AIDS is presented in table 4.9. The results showed that 82.5 per cent of adolescent mothers were aware of mode of transmission of HIV/AIDS, 7 per cent were not aware of the mode of transmission and 10.5 per cent were not sure about the mode of transmission.

Table 4.9 Percent distribution of adolescent mother's knowledge on transmission of HIV/AIDS

Knowledge on mode of transmission	Number N=400	Percent
Yes	330	82.5
No	28	7.0
Not sure	42	10.5

4.10 Knowledge on reducing the risk of contracting HIV/AIDS

The percent distribution of adolescent mothers on their knowledge of reducing the risk of getting HIV/AIDS is presented in table 4.10. Safe sex was reported by a majority of adolescent mothers to reduce the risk of contracting HIV/AIDS as reported by 48.5 per cent of adolescent mothers which was followed by abstinence till marriage (31.8 per cent) and sex using condom (28.8 per cent).

Table 4.10 Percent distribution of adolescent mothers according to their opinion to reduce the risk of getting HIV / AIDS

Ways of reducing the risk of getting HIV/AIDS	N	Yes		No		Don't know	
		No	Percent	No	Percent	No	Percent
Abstinence till marriage	400	127	31.8	212	53.0	61	15.2
Safe sex	400	194	48.5	145	36.3	61	15.2
Sex using a condom	400	115	28.8	225	56.2	60	15.0
Mutual masturbation / Without exchange of bodily fluids	400	5	1.2	335	83.8	60	15.0

4.11. Myths / Misconception about HIV/AIDS

The percent distribution of mothers by myths about HIV/AIDS as presented in table 4.11. Transmission of AIDS through touching the infected person was reported by 10.8 per cent, playing with the infected person was reported by 10.5 per cent, hugging them was reported by 10.8 per cent, being in the same room was reported by 4.3 per cent, being the same swimming pool and sharing cloths, books, toys, etc. were reported by 4 per cent each. Increase in education decrease the level of myths and misconception about HIV/AIDS among the adolescent mothers.

Table 4.11 Percent distribution of adolescent mothers' who had myths / misconception about HIV/AIDS by education

Activities	Education level				Total
	Illiterate	Literate and Primary	Middle	High school and above	
	N=63	N=72	N=123	N=142	
Touching them	15.9	12.5	11.4	7.0	10.8
Playing with them	15.9	13.9	11.4	5.6	10.5
Hugging them	15.9	12.5	12.2	6.3	10.8
Being in the same room with them	7.9	1.4	4.9	3.5	4.3
Being in the same swimming pool, shower	7.9	1.4	4.9	2.8	4.0
Sharing cloths, books, toys	7.9	1.4	4.1	3.5	4.0

4.12 Cure for HIV/AIDS

The percent distribution of adolescent mothers' knowledge about cure of HIV/AIDS is presented in table 4.12. Majority of adolescent mothers (56.8 per cent) reported that there was no cure, 40.2 per cent were not sure about cure and only 3 per cent reported that there is cure for HIV/AIDS.

Table 4.12 percent distribution of adolescent mothers' knowledge about cure for HIV/AIDS

Cure for HIV/AIDS	Number of Respondents	Percentage
	N=400	
Yes	12	3.0
No	228	56.8
Not sure	160	40.2

4.13 Summary and Conclusions

The analysis of data on knowledge of adolescent mothers on sexually transmitted diseases showed that the main source of knowledge about sexually transmitted diseases was television (45.5 per cent) followed by siblings (33.3 per cent). About two fifths (40.5 per cent) of adolescent mothers had no knowledge about the transmission of sexually transmitted diseases and 55 per cent reported sexual intercourse as the main mode of transmission of STD. 30 per cent of adolescent mothers had no knowledge about the high risk of transmission. 48.5 per cent did not know the medical problems focused by men, 46.2 per cent didn't know the medical problems of women. About one fourth of adolescent mothers (24.5 per cent) reported that men suffer more than women and 22.7 per cent reported that women suffer more than men. About one fifth of the adolescent mothers were not sure about the severity of sufferings.

Husband was the main source of advice as reported by 48.5 per cent of respondents when they suspected to have sexually transmitted diseases. Majority of adolescent mothers (78.3 per cent) reported that sex with many different partners as risky sex. Age of mother did not make much difference on the knowledge of adolescent mothers on risky sex.

Regarding knowledge on HIV/AIDS, about half of the adolescent mothers (50 per cent) correctly reported that it was a virus. 82.5 per cent of adolescent mothers were aware of any one of the methods of transmission of HIV/AIDS and 10.5 per cent were not sure about the ways of transmission. Transmission through blood of an infected person was reported by a majority of adolescent mothers (99.1 per cent) which has followed by semen in men (86.4 per cent), vaginal fluids in women (84.2 per cent), and using of unsterilized needles (90.9 per cent). Knowledge on cure for HIV/AIDS and availability of vaccine was more among educated mothers and those who had high standard of living and high level of exposure to mass media. Increase in age and education increase the knowledge of adolescent mothers on treatment for longevity of HIV patients.

There are numerous channels to integrate sexual and reproductive health services in a strengthened health system. For example maternal and child health services can provide an opportunity for family planning information programs, referrals and services. Integrated maternal health, family planning and child health care services should add appropriate personnel and increase referral capacities.

Counselling, prevention and treatment services for sexually transmitted infections and HIV should be integrated with other reproductive health services and made available through

the primary health care system, which is most likely to reach populations in greatest need, such as adolescents and the poor. Single purpose programs for preventing and treating sexually transmitted infections almost always fail to reach adolescents because many adolescents are asymptomatic, and seeking treatment is socially stigmatized.

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