

**STUDY ABOUT KNOWLEDGE, AWARENESS AND ATTITUDE TOWARDS REPRODUCTIVE HEALTH OF WOMEN IN BORGAON VILLAGE OF WARDHA DISTRICT.**

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**Abstract:**

**Background:** Reproductive health is considered as a condition of absolute somatic, psychological and social contentment and not even present of any disease, along with the functions & activities concerning to reproductive system. Prevention & treatment of the sexually transmitted (STD's) are included in sexual & reproductive health care, which also involves HIV/AIDS. Reproductive health care system helps to promote the proper diagnosis, treatment & critical situations of the disease. **Aim:** Aim is to study about knowledge, awareness and attitude towards reproductive health of women in Borgaon Village of Wardha District. **Objectives:** 1) To study the knowledge and awareness towards reproductive health of women in Borgaon Village of Wardha District. 2) To study the attitude of women about reproductive health. **Methodology:** Cross sectional observational study will be done in community. Women of 20 – 45 years of age group will be personally interviewed on the basis of well-structured questionnaire. By personal interviews data will be collected in Borgaon Village of Wardha District. Socio demographic factors, knowledge and awareness regarding reproductive health in women will be evaluate by using questionnaires administered by interviewer. Verbal consent of the subject will be taken before interview. **Result:** Result will be analysed statistically on the basis of study. **Conclusion:** Conclusion will be on the basis of observation and analysed data. **Keywords:** Knowledge, Women, Reproductive health, Awareness, Attitude

**Introduction:**

According to the World Health Organization (2017), period after childhood and before adulthood is known as adolescence. Human growth and development occur from the age group of 10 to 19 years. The adolescence is further classified into three phases, that are, early adolescence i.e. 10 to 13years of age, mid-adolescence i.e.14 to15years of age & late adolescence i.e.14 to 19years of age. Somatic and mental development of girl for safe motherhood is nothing but the period of adolescence. Overall adolescent health is covered under reproductive health [1].

Socio economic status and education both are very crucial factors to determine women's health. Rather focusing only on disease, it is very important to reported and realized these factors which influences reproductive health consequences and women's health seeking behaviour at community level [2].

Nearly any one is conscious of the extremely bad reproductive health situation in women. The needs for reproductive health care are broad. Nevertheless, development of reproductive health care is not a trouble-free objective in society. Perspective which is widely accepted and socially integrated is very important for any inculcative initiative in the reproductive health care zone. The perspective should have a better way of understanding the current place of women in society and what they really deserve and desire [3].

Physiological fact which is naturally occur in adolescent girl and premenopausal women is called as menstruation. Clean menstrual management material used by women and adolescent girls to absorb or to collect the blood during the period of menstruation which can be changed in privacy according to need is nothing but menstrual hygiene management. It also includes washing the body with help of water & soap, and proper disposal menstrual management material [4].

Girls and women having low income are less aware about hygienic practices & lack of suitable materials use for menstrual hygiene management. Menstruation is usually surrounded by shame, silence as well as social prohibition. In religious countries it is found that normal activities and freedom is restricted due to menstruation. Such as, cooking food, performing religious rituals, interacting with people, drinking milk, etc limitations found in many cultures [4].

The main moto of this study is to assess the awareness regarding reproductive health among women in the rural population and to study their attitudes towards reproductive health. Because in India, there is insufficiency of such type of studies, mainly in rural areas.

**Objectives:**

- 1) To study the knowledge and awareness towards reproductive health of women in Borgaon Village of Wardha District.
- 2) To study the attitude of women about reproductive health.

**Methodology :****Study design:**

Cross sectional observational study will be done in community. Women of 20 – 45 years of age group will be personally interviewed on the basis of well-structured questionnaire. By personal interviews data will be collected in Borgaon Village of Wardha District. Socio demographic factors, knowledge and awareness regarding reproductive health in women will be evaluate by using questionnaires administered by interviewer. Verbal consent of the subject will be taken before interview.

**Study setting:**

Study will be conducted in Borgaon Village of Wardha District.

**Sample Size:**

100

**Study Type:**

Cross sectional Observational study

**Duration of Study:**

6 months

**Inclusion Criteria:**

Women between 20 to 45 years of age

**Exclusion Criteria:**

Women below 20 years and above 45 years of age

**Ethics & dissemination:**

Ethics approval was obtained from Institutional Ethics Committee, Mahatma Gandhi Ayurveda College, Hospital & Research Centre, Salod (H), Wardha 442001.

**Strength and Limitation:**

We will try to educate and aware as much women as possible about reproductive health so that they won't face any problem if they come across any problem regarding reproductive health in future and will be able to successfully deal with it.

### Expected Results

Poor menstrual hygiene causes great impact in increased vulnerability to reproductive tract infections [RTI]. Currently millions of women suffer from RTI and infection is transmitted to the offspring. The aim of this study is to determine the perception of different aspects of Reproductive Health and hygiene. Hence the result will be analysed statistically on the basis of study.

### Discussion

In the current analysis, development in the reproductive hygiene measures such as washing external genitalia and proper management of cloth improved reproductive health education. In the same way development in menstrual hygiene and health education was also concluded in the research conducted by Arora and Nemade. Hence, reproductive health education remarkably improved knowledge, attitude, and practices regarding menstrual hygiene. A study conducted by El-Lassy among women of Damanhur City of Egypt also showed that reproductive health education significantly improved knowledge and practices.[5].

An analysis of studies on reproductive knowledge and beliefs among Iranian women disclosed a relatively high level of knowledge of contraceptive methods and good attitude [6].

It is of paramount importance to mention that the level of awareness about reproductive health of women was substantially high. What is remaining to do is to bring behavioural change in the women. In this context, much more than what is being done is expected from IEC programs and counselling by way of developing women's knowledge of reproductive health, and hence changing their practice regarding reproductive health [7].

Women's level of knowledge plays important role in accessing proper reproductive health services. Key to success is nothing but advising and increasing awareness about reproductive health in women of rural area. So, this study took initial step to check reproductive knowledge and attitude of women in rural population [8]. Neema et al assessed Gonadotropin levels in hypothyroid women of reproductive age group[9]. Fule et al studied about various vaginal infections among women of reproductive age in rural area[10,11]. Thakre et al discussed on early detection of urinary tract infections in rural India[12]. Zahiruddin et al discussed on challenges and patterns of complementary feeding for women in employment[13]. Behere et al studied about sexual abuse in women with special reference to children[14]. Gaikwad et al studied nitrosative stress in pregnancy induced hypertension[15]. Gondivkar et al reported on Oral Pregnancy Tumor[16]. Salampur reported a case of Acute Respiratory Distress Syndrome during Pregnancy[17]. colour doppler evaluation in high-risk pregnancy was reported by Singh et al [18].

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