

Prevalence of Health Status and Reproductive Profile of Adolescent Girls in Urbanslum Area

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Abstract: Women plays a pivot role in the family and society throughout the different phases of her life, of which the period of adolescence is the most important. This cross sectional study is carried out in a slum area of Jobra, Cuttack Town, Orissa from April, 2014 to April 2015, to find out the prevalence of different reproductive morbidities, to assess the role of factors influencing and remedial measures to reduce these conditions. In this study 192 adolescent girls are investigated, Prevalence of different morbidities in this study are found to be 67.7%, in which Anaemia is observed more among study subjects, a high magnitude of problem in the Society of slum area. The factors which are responsible in the present study, are low economic status, low education, unclear family and early marriage. The present study clearly indicates the extent of the problems in adolescent girls who are the future mother. So necessary interventions are therefore essential for the prevention of such morbidities in adolescent girls like minimum marriage age should be 18 years, first pregnancy should be beyond 18 years, maintenance of good personal, genital, and menstrual hygiene, sex education in school and prevention of Anaemia.

Keywords: Anaemia, Adolescent, Menstrual Hygiene, Dermatitis, Morbidities, Early Marriage

1. Introduction

Women plays a pivot role in the family and society throughout the different phases of her life of which the period of adolescence is the most crucial. Adolescence is the period of transition from childhood to adulthood, (10-19 years). The adolescent girl of today is the mother of tomorrow. Adolescent girls constitute 10% of total population in India.

Most of the infectious & Chronic diseases are less in adolescence but high risks are associated with STD, pregnancy and reproductive disorders. Their health problems are not given much importance and have no special health care facilities' available for them, who are staying in slum area.

Adolescent pregnancies constitute 10-15% of total pregnancies in India. The maternal mortality is 5 times higher in 10 to 14 years of age group, as compared to 20 to 14 years. Early marriage, teen-age pregnancies & illegal unsafe abortions cause a great hindrance in the physical, mental, social & psychosexual development of adolescent girls. Increase prevalence of Anaemia along with reproductive tract infections, prevent the adolescent girl to lead a healthy & productive life. The adjustment problems in family, school in peer age group are marked during adolescence.

Therefore an attempt has been made in the present study to review and assess the health status of adolescent girls staying in slum area.

2. Material & Methods

This study entitled "Prevalence of Health Status and Reproductive Profile of Adolescent Girls in an Urban Area" is carried out in a slum area of Jobra, Cuttack City under supervision at S.C.B Medical College, Cuttack from April 2014 to March 2015.

The objective of this study is to:

- Assess the general health status of Adolescent girls.
- To find out the prevalence of different morbidities, specially, reproductive morbidities among the adolescent girls.
- To find out the different factors influencing the morbidity conditions.
- To suggest remedial measures to reduce their morbidities.

In this study 192 Adolescent girls are interviewed and examined. At random one household is selected and then data are collected by door to door visit. Only one adolescent girl in the age group of 10 to 19 years, who is the eldest, is selected for interview and examination. Their socio-economic status are assessed. The information like marital history, age of menarche, menstrual history, dermatological conditions, degree of Anaemia, reproductive morbidities and demographic status are recorded.

3. Observations and Results

Table 1: Socio-Economic Status of Studied Households

Socio Economic Status	Number	% Percentage.
High	23	12
Middle	130	67.7
Low	39	20.3
TOTAL	192	100

It is observed that 23 (12%) households belong to high Socio – Economic status. So maximum of households are in middle Socio- Economic Status.

Table 2: Different Types of Morbidities in Adolescent Girls

Types of morbidity	Number	% Percentage.
Skin Diseases	98	51.4
Parasitic Infection	28	14.5
Tuberculosis	10	5.2
Malaria	8	4.1
Rhinosporidiosis	1	0.5
No Diseases	47	24.4
TOTAL	192	100

From the above table it is found that skin diseases present in 98 (51.4%) girls, parasitic infestation in 28 (14.5%) Tuberculosis in 10 (5.2%), Malaria in 8 (4.1%) , Rhinosporidiosis in 1 (0.5%) girl at the time of study. So total 145 morbidities present in 192 girls and 47 numbers are having no diseases, which constitutes 24.4%.

Table 3: Dermatological Morbidities among Study Group

Skin Diseases	Age in Years		Total (%)
	(10-14 yrs)	(15-19 yrs)	
Acne	10	27	37 (37.7%)
Dermatitis	23	13	36 (36.7%)
Fungal Infection	2	17	19 (19.4%)
Vitiligo	1	5	6 (6.1%)
Sub Total	36	62	98 (51%)
No Skin Diseases	30	64	94 (49%)
TOTAL	66	126	192

This table shows dermatological morbidities among the study group.

Table 4: Nature of Menstrual Cycle Among Study Subjects

Type	Age in Years		Total (%)
	(10-14 yrs)	(15-19 yrs)	
Regular	18	120	138 (71.8)
Irregular	33	21	54 (28.1)
Total	51	141	192
<u>Menstrual Hygiene</u>			
-Use Pad	6	18	24 (12.5)
-Use Cloth	51	117	168 (87.5)
TOTAL	57	135	192

From the above table it is seen that menstrual cycles are regular in most of the cases i.e 138, which constitutes 71.8% and irregularity seen in 54 cases i.e. 28.1% Irregularity seen more in 10-14 years of age group.

Among the study groups most of them use cloths during the cycle i.e 168, which constitutes 87.5% and only 24 numbers use pads i.e. 12.5% 15-19 years of age group are using more cloths during their menstrual cycle i.e. 117 numbers in 98 (51%) and absent in 94 (49%) girls. The dermatological morbidities among early adolescent girls as revealed by present study, which shows that maximum number of girls suffering from dermatitis. Out of which 126 are late adolescent girls, 62 are having some form of dermatological morbidities.

Table 5: Prevalence Of Anaemia Among Adolescent Girls

Anaemia	Age Distribution		Total (%)
	(10-14 yrs)	(15-19 yrs)	
Mild	15	20	35 (18.2)
Moderate	25	72	97 (50.5)
Severe	0	5	5 (2.6)
Sub- Total	40	97	137 (71.3)
Absent	26	29	55 (28.7)
TOTAL	66	126	192 (100)

It is found that out of 192 study group, Anaemia present in 137 (71.3%) girls and absent in 55 (28.7%) among total girls. The prevalence of anaemia is 40 (60.6%) among early adolescent girls and 97 (77%) among late adolescent girls. This reflects the uniformity of burden of Anaemia in the adolescent girls which is a potential risk factors for their future motherhood.

Table 6: Distribution of Study Subjects According to Age of Marriage

Age (In Yrs)	Number Of Girls		Total (%)
	Married (%)	Unmarried (%)	
<18	9 (7)	119 (93)	128 (66.7)
≥18	11 (17.2)	53 (82.8)	64 (33.3)
TOTAL	20 (10.4)	172 (89.6)	192 (100)

From the above it is seen that out of total 192 study subjects, 20(10.4%) girls are married and 172 (89.6%) are unmarried. Among 20 girls, 9 girls are married at an age below 18 years and 11 are married at 18 years of age or more.

Table 7: Distribution of Study Subjects According to Types of Vaginal Discharge

Vaginal Discharge	Age in years		Total (%)
	(10-14 yrs)	(15-19 yrs)	
Physiological	18 (69.2)	52 (75.3)	70 (36.4)
Pathological	8 (30.8)	17 (24.7)	25 (13.2)
Sub- TOTAL	26	69	95 (49.4)
No Vaginal Discharge	49	48	97 (50.5)
TOTAL	75	117	192(100)

Out of the 192 study subjects, 95 are having vaginal discharge and 97 are having no vaginal discharge. Among the vaginal discharge 70 (36.4%) having physiological discharge and 25 (13.2%) are having pathological vaginal discharge. Among 95 girls with having vaginal discharge, 26 girls are in early adolescent and 69 are in late adolescent age group.

Table 8: Distribution of Reproductive Morbidities of Study Subjects

Reproductive morbidities	Age in years		Total (%)
	10-14 (yrs)	15-19 (yrs)	
-Candida Infection	4	8	12
-Trichomonas Vaginalis	1	3	4
-Chlamydia	1	2	3
-Gonococcal	0	1	1
-Scabies	1	0	1
-UTI	1	3	4
Sub- TOTAL	8 (12.1)	17 (13.5)	25 (13)
No Infection	58 (87.9)	109 (86.5)	167 (87)
TOTAL	66 (34.4)	126 (65.6)	192 (100)

From above it is seen that out of 192 study subjects reproductive morbidities are present in 25 and absent in 167 girls. Among the 66 early adolescent girls, morbidities present in 8 (12.1%) and absent in 58 (87.9%). The same in late adolescent are 17 (13.5%) and 109 (86.5%) girls respectively.

4. Discussion

Out of 192 study subjects, 66 (34.4%) are in the age group of early adolescence i.e. 10 to 14 years and 126 (65.6%) are in the age group of late adolescence (15-19 years). About 20 (10.4%) girls are married and all are in late adolescence period. Most of the study subjects i.e. 130 (67.7%) are from middle socio-economic group whereas 39 (20.3%) and 23 (12%) are from low & high socio-economic group respectively. The prevalence of Anaemia is 40 (60.6%) among early adolescent girls and 97 (77%) among late

adolescent girls. This indicates comparatively higher prevalence of Anaemia in late adolescent girls.

During investigations it is found that maximum girls are having skin diseases (51.1%) & most of the girls (67.7%) are having one or more than one morbidities. There is no significant difference observed in the overall prevalence of dermatological morbidities in both early and late adolescent age group. The prevalence of adolescent marriage is observed to be 20 in present study. About 9 girls are married at an age below 18 years. There is no significant difference observed in vaginal discharge between early and late adolescent period. Pathological vaginal discharge is present maximum in married girls.

The prevalence of reproductive morbidities is 25 (13%) in the study population. Most of them are suffering from candida infection i.e. 12. There is no significant difference observed in the prevalence of reproductive morbidities between early and late adolescent age group.

5. Conclusion

This study was undertaken to assess the prevalence of different morbidities among the adolescent girls, who are staying in slum area. Overall prevalence of different morbidities in the current study is found to be 67.7% among which Anaemia is observed more. Anaemia now a days has a high magnitude problem.

Factors which are found to be acting in aggravating their morbidities are low socio-economic status, low level education and early marriage. The present study clearly indicates the extent of problem in adolescent girls who are the future mother. So necessary interventions are essential for the prevention of such morbidities in adolescent girls as follows :-

- Minimum marital age should be 18 years.
- Raising the age of first pregnancy beyond 18 years.
- Maintenance of good personal and genital & menstrual hygiene.
- Special emphasis should be given on Sex Education in school.
- Organising health camp for early detection of STD and AIDS in adolescent girls.
- Provide iron & folic acids for preventing Anaemia.

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