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# The study of health awareness and attitude among senior college girl students from Pune district 

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#### Abstract

: Young girl population in India, account major part of the total population and are a significant human resource that needs to be given ample opportunity for holistic development towards achieving their full potential. The adolescents are studied in most of the research. But Studies on young girl population limited. Many health problems such as obesity, depression and anxiety are seen in among adolescent girl. Young girls are affected by the life style, diet, attitude and behavioral control. It is necessary to study the attitude and health issues in young girls. Changing environment, pollution, lifestyle have affected the life of human being and so girls are not the exception to that. Several physical and mental health problems are seen in young girl. The rural and urban environment has different lifestyle, goals, educational, medical facilities and society. So the health issues are different in rural, urban areas. To know the health status of young girls (1824 yrs ) and to know their attitude and awareness towards the health data collected from the colleges in urban and rural areas of Pune district.

The primary data is collected to know the attitude and awareness and health issues in the girls in rural and urban areas in Pune district. The question related to life style, diet, physical and mental status has given the information of the attitude and awareness towards the health. Interviews are taken by the doctors and medical professionals for the health status and health problems in the young girls.


## Introduction -

Adolescent population is important in the sense of health, literacy, educational status, progress and development of any country. Adolescent is the age group if nurtured goes to a great high and takes the country to greater height. So adolescent are taken care in every country. Adolescence is a critical link between childhood and adulthood, characterized by significant physical, psychological, and social transitions. Healthy adolescent shows the well being of the society. Adolescent girl has significant as they have the role in stability, progress and long term development of nations. In the population of India female adolescent population is low than male population. Trafficking and Prostitution, crimes, addictions are the major problems related to the Indian adolescents.

Adolescence is (divided into early adolescence (11-14 yr), middle adolescence ( $15-17 \mathrm{yr}$ ), and late adolescence ( $18-21 \mathrm{yr}$ ). Individuals in the age group of $20-24 \mathrm{yr}$ are also referred to as young adults. Physical development is generally complete by late adolescence. By this point, the young adult also typically has developed a sense of selfidentity and a rational and realistic conscience, and he has refined his moral, religious, and sexual values. He is able to compromise, set limits, and think through issues to make decisions. Cognitively, the young adult is still developing, and new research evidence suggests that this process may continue into the third decade of life.

The age group of late adolescent girl in colleges is taken for the study. Young girls have their own developmental needs, which are peculiar to them and need to be addressed separately.

## Scope

The status of Adolescents in Indian population shows the significance of this age group in population. As per the census 2011 there are 243 million adolescents comprising nearly one-fifth of the total population (21.4\%). Female adolescents comprise 46.9\% and male adolescents $53.1 \%$ of the total population. Maternal mortality rate due to teenage pregnancy is $9 \%$ (2007-2009) - A high risk of pregnancy and childbirth results in a high level of female mortality in the reproductive age group. Maternal mortality of teenage mothers is a grave cause for concern. There are marked inequalities in education among adolescents in India. 53\% dropout during class 1 - 10, only $2.35 \%$ adolescent continue higher secondary education with high dropout rate for both girls and boys. Crimes against adolescents are prevalent - Sexual abuse of both boys and girls cuts across economic and social classes. Misconceptions about HIV/AIDS are widespread - There is a high level of awareness about HIV among young people especially among those who are more literate.

## Objectives:

With the aim of study of health status in college going girls the study has undertaken with the following objectives.

1. To know the attitude and awareness about the health in the late adolescent girls
2. To know the difference in attitude and awareness about the health in the girls in rural and urban areas.
Methodology - The present study was conducted in Rural areas of Saswad Taluka and urban areas of Hadapsar in Pune of

Maharashtra during the period of September to November 2019, with the aim of finding out the attitude, awareness and practice towards health issues in the girls. 187 girl students from urban and 100 girl students from rural areas are selected. The questions were asked related to life style, diet, physical, mental status, information about Aids.

## Discussion:

College going girls are mothers in future and are important part of society. Students should have scientific knowledge regarding the health issues. Education is necessary for the health of young girls. All the girls are well aware about the diet and they do not eat junk foods frequently in month. As well as they are aware about the importance of hand wash and healthy life style.

## Knowledge of HB and blood group

To know the blood group is very important regarding our own health and to help other through blood donation. In the findings it is seen that girls in the Saswad 75 $\%$ girls are not aware about their hemoglobin count. Only $25 \%$ girls have given their hemoglobin count. In Pune city $61 \%$ girls don't know their hemoglobin count. In saswad $56 \%$ girls are with less than 10 HB , $36 \%$ girls having 10-13 HB and very less number is having standard HB count more than 13 is $8 \%$. In Pune city $38 \%$ girls having less than $7 \mathrm{HB}, 54 \%$ girls having 10-13 HB and very less count is having more than 13 HB which is $9 \%$. Finding shows that HB count is less in rural areas. Only $86 \%$ girls in the Rural areas know their blood group in urban areas 92 \% girls know their blood group.

|  | Rural |  | Urban |  |
| :---: | :---: | :---: | :---: | :---: |
|  | Yes (\%) | No (\%) | Yes (\%) | No (\%) |
| Knowledge of HB | 25 | 75 | 73 | 114 |
|  | $\begin{array}{\|l} \hline \text { Numbe } \\ \mathbf{r} \\ \hline \end{array}$ | \% | $\begin{array}{\|l\|} \hline \begin{array}{l} \text { Numbe } \\ \mathbf{r} \end{array} \\ \hline \end{array}$ | \% |
| $<7$ | 02 | 08 | 02 | 03 |
| 7-10 | 12 | 48 | 26 | 35 |
| 10-13 | 09 | 36 | 40 | 54 |
| >13 | 02 | 08 | 05 | 09 |
| $\qquad$ | 86 | 14 | 92 | 08 |
| BMI |  |  |  |  |
|  |  |  |  |  |
| <18.5 | 56 |  | 56 |  |
| 18.5-25 | 40 |  | 40 |  |
| $>25$ | 4 |  | 4 |  |

Weight and BMI - In the finding of weight of girls there is no difference in the weight in rural and urban areas. At both places in urban and rural area $56 \%$ and $57 \%$ girls have a range of 35 to $45 \mathrm{~kg}, 28 \%$ girls are in the range of 45 to 55 kg and very few are in the range of overweight more than $55(11 \%$ and 9 $\%$ ). In the finding of BMI at Saswad only $46 \%$ girls and at Pune $81 \%$ girls responded to weight. In case of BMI of the girls $56 \%$ girls are underweight, $40 \%$ are normal and $4 \%$ girls are overweight. There is no difference in urban and rural areas.
Diet, food habits and health practices The answer to the intake of milk is no. The $63 \%$ girls in Saswad and $64 \%$ girl do not take milk in their diet. Water is our body's principal chemical component and makes up about 60 percent of our body weight. The findings for water intake in a day show that $66 \%$ girls in Saswad and $68 \%$ girls in Pune city have water intake $2-3$ liter. $59 \%$ girls in Pune city and $75 \%$ in Saswad have a habit to brush teeth before going to the sleep.
Exercise and sports - Physical activity or exercise improves health and reduce the risk of developing several diseases like type 2 diabetes, cancer and cardiovascular disease. Physical activity and exercise have

|  | Feeling <br> drained <br> evening | tired <br> in |
| :--- | :--- | :--- |
|  | Rural (42\%) |  |
| the |  |  |\(\left|\begin{array}{l}Urban <br>

\mathbf{( 3 9 \% )}\end{array}\right|\)

Awareness about health and Aids - 77\% girls in Pune city collect information about the health and $88 \%$ girls in Saswad collect information about the health. The source to collect the information is mainly internet. $36 \%$ girls in Pune city and $30 \%$ girls in Saswad don't know about the Aids.

## Conclusion

It is seen from the findings that girls in both the areas have good health habits e.g washing hands. But food habits i.e. intake of milk, intake of water no concern is observed in the girls. The importance of exercise and physical activity are less in both rural and urban areas. Physical problems regarding pain, headache, backache and menstruation are seen in the girl. It is seen than health problems and problems regarding menstruation are related to the exercise, participation in sport activity and food
immediate and long-term health benefits. Responses to the question of exercise $43 \%$ girls in Saswad practice exercise and $39 \%$ girls in Pune city do exercise. In case of sports only $28 \%$ girls in urban areas of Hadapsar and $32 \%$ girls in Saswad participate in sport activity.
Health Problems - It is seen from the findings that $19 \%$ in rural and $16 \%$ girls in urban areas have problems related to the menstruation. Pain, irregularity are the common problems in the girls. Regarding other health problems $33 \%$ in rural and $23 \%$ girls have health problems like headache, backache, back pain, weakness.

The findings suggest that the menstruation and health problems of the girls are related to food habits, diet and exercise and sport activities. Another question is asked to the energy level of the girls in a day. $42 \%$ girls in Saswad and $39 \%$ girls in Pune city feel tired and drained in the evening. The relation between the energy and exercise, sports and diet is seen in the following table. It is seen that Girls who don't participate in sport activity don't have exercise and don't have milk in a diet do not feel energetic in the evening.

| Health <br> Problems |  | Menstruation <br> problems |  |
| :--- | :--- | :--- | :--- |
| Rural <br> $\mathbf{( 3 3 \% )}$ | Urban <br> $\mathbf{( 2 3 \% )}$ | Rural <br> $\mathbf{( 1 9 \% )}$ | Urban <br> $\mathbf{( 1 6 \% )}$ |
| 66 | 75 | 68 | 60 |
| 66 | 54 | 63 | 60 |

habits. It is seen from the table given, Girls having health problems and menstruation practice no exercise and not participate in the sport activity. The concern is with the knowledge of blood group and HB count. Girls do not aware regarding this. The medical consultation for the menstrual and health problems is very low. Proper and early intervention, through health counselor is required to ensure decrease in the extent of the problem. No clear difference in attitude and awareness is observed in rural and urban areas.
Recommendations - The need for proper knowledge, guidance and counseling is necessary. Lectures should be arranged in the college on health and nutrition. Awareness programs for the girls from college as well as from home should be given.

Limitations: Study population is college students hence results cannot be applied to all the adolescents population. Similarly, study was limited to one college in rural and urban area, so wider applicability is compromised. More such studies with greater reach are required to for the better conclusion regarding the topic.

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