

**Treatment Seeking Behavior of the Tribal Women and Men suffering
from RTI/STI in Nashik District of Maharashtra**

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Executive Summary

The present report contains findings of the study entitled 'Treatment seeking Behavior of the Tribal Women and Men suffering from RTI/STI in Nashik District of Maharashtra'. The study was conducted in the 8 tribal dominated Primary Health Centers of the Nashik district in the state. A total of 477 women and 220 men were interviewed for the present study. The fieldwork for the study was conducted by the trained male and female investigators under the supervision of the project coordinator during April-May 2001. The major findings of the study are as follows:

Profile of the Surveyed Households

- About 30 per cent of the women and men respondents live in Kachcha houses whereas another a little over 56 to 58 per cent live in semi-pucca houses.
- About 40 to 42 per cent of the respondents get drinking water from well. Tap water for drinking purpose water for the household was available to about half of the women and men respondents.
- Majority of surveyed households did not have any sanitation facility; only 3 per cent of the women and about 6 per cent of the men respondents had toilet facility within homes.

Socio-economic and Demographic Characteristics of the Respondents

- The mean age of the women respondent was 30.68 years whereas in case of men respondent it was 35.90 years.
- The mean age at marriage worked out to be very low for both women and men respondents (14.90 and 18.61 years respectively). Over 47 per cent of the women married before reaching 15 years of age.
- The mean number of living children per woman in the study population was 2.90 (the mean number of sons and daughters was 1.52 and 1.40 respectively).
- Nearly 36 per cent of the women had 3 living children while another about 19 per cent had 4 or more living children indicating prevalence of relatively higher levels of fertility.

- Almost two-thirds of the women and about a quarter of the men respondents did not have any formal schooling.
- Nearly 43 per cent of the women and 45 per cent of men were working on their own land whereas another 38 per cent of the women and about 30 per cent of the men were working as laborers on someone else's land.
- Only one in every five literate women (about 18 per cent) reportedly read news paper once a week while every second literate man reported reading news paper once a week.
- About one third of the women and half of the men watched TV at least once a week.

Family Planning: Knowledge and Use

- Cu-T and Oral Pills are known to about three-fourth of the women respondents whereas only about a half knew about Condom. Saheli Pill was known to only about one-fifth of the women respondents.
- Over 82 per cent of the men knew about Condom and Oral Pill whereas Cu-T was known to only about 58 per cent of the men.
- About half of the women and 55 per cent of the men knew about all three methods (IUD, OP and Condom).
- Less than 6 per cent of the women and men knew about MTP.
- Knowledge of IUD, Oral Pill or Condom was relatively better among younger, better educated and those exposed to various types of mass media.
- Majority of the women and men who knew about the methods also knew about the place from where one could get these methods (in most cases ANM, PHC and medical shop).
- Surprisingly fewer women and men knew that the Condom was available with the MPW.

- About 75 per cent of the women and about 80 per cent of the men reported using modern methods of family planning (typically female sterilization was the most popular method).
- The natural methods of family planning were used by only about 5 per cent of the couples.
- Spacing methods were used by very few of the women and men, as about 4 to 5 per cent reported using Cu-T, OP or Condom.
- Percentages of users of family planning increased with the age of the respondent, number of living children, greater exposure to mass media.
- Current use of the family planning greatly depends on the sex composition of the living children couple had at the time of family planning acceptance.
- The concept of spacing between marriage and first birth and does not seem to prevail in the study population. Similarly, the concept of spacing between the first and second birth is not very popular either.
- Out of the 220 men interviewed all but 29 preferred female methods of family planning (75 per cent preferring female sterilization).
- 'Fear of Weakness' followed by 'Fear of Impotency' emerged as the important reasons given by majority of the men for not preferring the male method(s).
- About 20 per cent of the men thought that they would have lesser sexual pleasure if they used a male method. Another about 20 per cent of the men told that they were scared of operation.

Knowledge of RTI/STI and HIV (AIDS)

- Nearly quarter of the women were aware of RTI. Even fewer women knew about STI (only one-sixth). Contrary to this, relatively more women knew about AIDS (39 per cent).
- The knowledge of STI and HIV (AIDS) was relatively better among men than women.

- Majority of the men and women respondents believed that the RTIs and STIs were curable whereas 9 and 4 per cent of the women and men respectively thought that the HIV (AIDS) was curable.
- Higher per cent of younger women and men knew about RTI and HIV as compared to their older counterparts.
- Educational status of the respondent and their exposure to various types of mass media seem to emerge as important factors influencing the awareness level when it comes the knowledge on these diseases.
- Health workers and relatives/friends appear to be the most important sources from where men and women learnt about RTI and STI (over two-thirds of the women learnt about RTI and STI from health workers and/or relatives/friends).
- In case of men, almost 80 per cent learnt about these diseases from the relatives/friends whereas nearly 56 per cent and 62 per cent learnt about RTI and STI respectively from the health worker.
- About HIV (AIDS), majority of the respondents learnt from the relatives and/or friends (72 and 79 per cent of women and men respectively) whereas a little over half of the men learnt about the killer disease from television and print media.

Knowledge on Mode of Transmission

- The knowledge of the respondents about the mode of transmission of these diseases too was found to be very poor (about 32, 27 and 25 per cent of the women respondents did not know about the mode of transmission of RTI, STI and HIV (AIDS) respectively).
- Lack of personal hygiene was reported as the source of transmission of RTI by about 43 and 56 per cent of the women and men respectively.
- Less than half of the women knew that one could acquire HIV (AIDS) through transfusion of infected blood and/or heterosexual intercourse. Very few of the women (ranging between 18 to 28 per cent) knew that one could get the killer disease during homosexual intercourse or by using infected needles/blades/skin puncture or it could be transmitted to the child from mother.

- About 84 and 65 per cent of the men respectively reported that HIV (AIDS) could be transmitted during heterosexual intercourse and/or through transfusion of infected blood. Further, nearly 56 and 33 per cent of the men respectively reported that the killer disease could be transmitted through use of infected needles/blades/skin puncture and/or from infected mother to her child.

Knowledge of the Respondents Regarding Prevention from the HIV (AIDS)

- Over 23 per cent of the women respondent did not have any knowledge on how to prevent oneself from acquiring HIV (AIDS).
- Single partner sex and/or checking the blood before transfusion were reported as means of protecting self from getting HIV (AIDS) by less than half of the women. Nearly 30 to 32 per cent of the women told that one could protect him/her against the disease by using condom during sex and/or using sterilized needles/syringes. 'Avoid pregnancy when infected with HIV (AIDS) was reported as means of protection from getting the disease by only about 7 per cent of the women.
- Men were relatively better since many of the men were aware of different ways in which one could protect him/her from acquiring the deadly disease.
- Nearly 77 and 58 per cent of men respectively told that they could avoid HIV (AIDS) by practicing single partner sex and/or using condom during intercourse. Checking blood before transfusion and/or using sterilized needles/syringes was reported by about 61 and 55 per cent of the men respectively. Only about 19 per cent of the men were aware that the pregnancy should be avoided when infected with HIV.

Misconception about the Spread of HIV (AIS)

- At the outset it seems that though the misconceptions about the spread of the disease though, on the whole, the levels were relatively lower, they typically were more common among women than men.
- About 20 to 22 of the women thought that one could get HIV by kissing and/or stepping on the urine/stool of the HIV infected person
- Nearly 13 to 18 per cent of the women reported that HIV could be acquired if one shared the utensils/clothes with HIV positive person and/or hugs a person who is infected person.

- Nearly 10 per cent of the women believed that HIV could be spread by shaking hands of the infected person.
- About 12 per cent of the men thought that the one could get HIV if he/she stepped on the urine/stool of the infected person.

Prevalence of the RTI/STI Infections and Treatment seeking behavior in the Past:

- About 90 per cent of the women had also suffered from one or more of the RTI in the past before the camp.
- White discharge was the most commonly prevalent RTI, as 8 in every 10 women had suffered from it while about 40 per cent of the women suffered from either 'burning sensation while urinating' and/or 'pain in the lower abdominal/vagina during intercourse'.
- Among those women, who suffered from the white discharge, about 29 per cent had thick curdy, white, foul smelling discharge whereas another 18 per cent had thin white foul smelling discharge. Nearly 18 per cent of the women suffered from the itching with the discharge and another 5 per cent from burning
- A little over half of the women reported that with the discharge they also had pain in the lower abdominal whereas about a quarter had fever.
- 'Difficulty/pain while urinating' was the most common disorder reported by the men (7 per cent). Another about 3 per cent men reported that they had 'discharge from the penis' while less than a percent suffered from 'sore on genital or anal area'. About half of the men reported that their Syphilis test in the past was positive.
- Almost 90 per cent of the women and over two-thirds of the men who suffered from one or more RTI in the past took treatment for the same, often went to more than one place seeking treatment.
- Over three-fourth of the women went to the government doctor whereas little less than a quarter went to the private doctor. Another about 19 per cent of the women took treatment from the nurse.
- Only few women had gone to the traditional practitioners for the treatment and/or directly got medicines from the medical shop/pharmacist.

- Out of the total 15 men, 10 went to the government doctor whereas remaining 5 went to the private doctor for the treatment.
- In most cases husband had taken the decision on to whether women should take treatment or not. Women themselves have very little say when it comes to these issues.
- 'Feels ashamed' followed by 'Unaware of the place of treatment were the most important reasons given by the women for not taking treatment for the disease (48 and 35 per cent respectively).

Prevalence of the RTI/STI Infections and Treatment seeking behavior at the time of Survey

- About one-fourth of the women were suffering from one or more RTI/STI at the time of survey (a quarter of them suffered from white discharge while another 10 per cent each suffered from the burning sensation during urination and pain in the lower abdominal during intercourse).
- More than half of the women told that get muccid non-foul smelling fluid with discharge occasionally. Another about a quarter of the women told that with discharge they also get thick curdy white fluid.
- Nearly 20 per cent of the women were suffering from itching with discharge whereas another about 5 per cent from burning.
- Over 45 per cent and 29 per cent of the women respectively told that with the discharge, they also get pain in the lower abdominal and fever.
- Nearly 88 per cent had sought treatment for the disease, (two-thirds from the government doctor and 30 per cent or so had gone to the private doctor). Nearly 29 per cent of the women took treatment from the ANM. In many cases women had taken treatment from more than one source.
- In about two-third cases it was husband who decided that the women take treatment. There were about 30 per cent of the women who decided on their own.
- About 54 per cent of women were satisfied with the treatment whereas remaining 46 per cent were not satisfied.

- About 29 per cent of the women stopped treatment without cure.
- Although majority of the women did not incur any expenses in the treatment, there were about 9 women who spent rupees one thousand or more on the treatment till the survey date.
- Eight of the men reported that they were suffering from discharge from penis and/or difficulty/pain while urinating.

Interaction with the spouse

- Over 82 and 77 per cent of the women and men respectively who suffered from one or more of the RTI in the past did discuss it with their spouse.
- Though in majority cases the spouses were supportive, there were few instances where it was reported that the spouse was shocked (5 per cent among women) or got angry (3 per cent) after learning about RTI.
- Among those who did not discuss the disease with the spouse, majority told that they did not feel the need for the same (over 81 per cent of women) whereas another 13 per cent told that they were advised by others to do so.
- All the 4 men who did not discuss it with their wife did not think it was necessary.
- In case of the present sickness, nearly three-fourth of the women discussed about the disease with their husband and his reaction was positive and very supportive.
- About 30 per cent of the case women told that their husband did not react when they told him about the disease.

Awareness, Availability and Accessibility of Health Care Facilities

- Sub-centre (SC), primary health centre (PHC) and government hospital (GH) was known to a large number of the women and men respondents. Very few of the respondents were aware of either rural hospital (RH) or government dispensaries (GD).
- About one third of the men and nearly 24 to 29 per cent of the women were aware of private clinic (PC) and private hospitals (PH) respectively.

- Over 93 per cent of them knew about the ANM whereas about 10 per cent of the women and 81 per cent of the men knew about the MPW.
- Fewer women and men knew about Dai in the village. Nearly half of the men and women knew about the government doctor in their area.
- About 86 per cent of women and 93 per cent of the men knew that the SC was within the village. About 20 and 14 per cent of the women and men respectively reported that the PHC was available within their village.
- Many respondents have to cover longer distances to reach the nearest PHC since for over 67 per cent of the women and 78 per cent of the men respondents the distance to the nearest PHC was more than 3 kilometers. In fact, the distance to the nearest PHC was beyond 10 kilometers for about 19 and 22 per cent of the women and men respondents respectively.
- Less than 20 per cent of the women and about 38 per cent of the men were aware that the treatment for RTI/STI was available at the Government or District Hospitals.
- Less than half of the women reported that the ANM in their area provide them with the information (about 48 per cent) as well give medicines (44 per cent) for the RTI. The corresponding figures for the men were even lower (31 and 23 per cent respectively).
- Very few of the women and men reported that the MPWs in their areas provide them with the information on RTI/STI (12 and 25 per cent respectively) and with the medicines (16 and 15 per cent respectively).

Interaction with the health worker

- Of the two-health workers- ANM and MPW, former seemed to be making more frequent visits to the people, about 12 and 28 per cent of the women and men respondents respectively reported that the ANM never visit them whereas half or more of the respondents reported that the MPW never visit their area.
- A little over 45 per cent of the women and about 21 per cent of the men were visited by the health workers during the reference period, the purpose of the discussions on matters related to health (68 per cent for women and 80 per cent for men).

Opinion of the Respondents about the Family Health Awareness Camps

- In majority of the instances camps were held in school (42 and 58 per cent respectively for women and men) followed by Sub-centre (37 and 19 per cent respectively for women and men). In another 20 and 17 per cent cases for women and men respectively, the camps were held at the PHC.
- Out of those women and men who were screened positive for RTI/STI, only about 38 and 58 per cent respectively were counseled at the camp.
- Majority of these people were given medicine for one week at the time of camp whereas about 16 per cent of the women and 22 per cent of the men were given reference slips for further treatment.
- It appears that the invitation cards for the camps were not distributed to all the women and men as only about 46 per cent of women and 61 per cent of the men reported that the health worker gave them the invitation card before the camp was held.
- The camps were largely held at School, sub-centre and PHC and in most cases the place of camp was within walking distance from the residence of the respondents.
- In only about 14 per cent of the cases the women was accompanied by their husbands whereas over three-fourth of the men told that their wives accompanied them to camp. The campaign thus clearly failed to attract couples and that the involvement of men in the camps seems to be very little.
- 'No Time' was the most common reason given by women for the absence of the husband (63 per cent) followed by 'did not feel necessary' by 21 per cent of the women. However, about 16 per cent of the women complained that the camp timings were inconvenient and hence their husbands could not accompany them for camp.
- About 97 per cent of the women and men told that the staff at the camp was very helpful and talked to them very nicely.
- The average waiting time for camp was 11.48 minutes for women and 26.58 minutes for men.
- Nearly 20 per cent of the women and 39 per cent of the men told that the doctor and the ANM advised them for further treatment etc.

- Among those advised for the treatment, 83 per cent of women and 64 per cent of men went for the treatment.

Availability of Various Facilities at the RTI Clinics

- Twelve of the clinics were located within the hospital building with properly displayed signboard giving the direction.
- The clinics have an average of 3 rooms spread over an average of 470 sq. ft. area.
- None of the 14 clinics covered here had vehicle.
- Half of the clinics have separate room for examining the patients while in the remaining clinics the patients were examined in the doctors room that has some temporary partition, indicating very little privacy.
- Presence of female health worker was always ensured while examining the female patients.
- Ten out of the 14 clinics had waiting space with furniture, though inadequate, for the patients.
- An average of 968 patients visited the clinic for treatment in the last one-year period, 77 patients visited the clinic in the last one-month prior to the survey and a little 3 patients (average) visited the clinic on the day of fieldwork.
- Although the medicines were supplied regularly and adequately in the 12 clinics there were 2 clinics where the clinic in-charge faced some problems in this respect.
- The national guidelines on the treatment of the STD seem to be strictly followed in all the clinics and it appears that the doctors perform all the necessary procedures and tests for all the patients and the doctors start the treatment immediately.
- The contact slip to the patients is provided in only half of the clinics. In Six out of the seven cases where contact slip is given, it is found that the patients bring their partners with them in the next visit.
- In all of the clinics, patients are invariably advised and supplied with condom.

- Only three clinics carry outreach services and IEC activities in their respective areas.
- The last two years period prior to the survey was nil indicating that all the sanctioned positions were occupied throughout the reference period although the clinic has to share the staff with other departments of the hospitals, as there is no separate staff for the clinic exclusively.
- Five clinics did not have the post of nursing staff and the post of laboratory was not sanctioned in as many as nine of the clinics.
- Three of the clinic did not have counselor post sanctioned.
- Eleven of the clinics did not have post of administrative staff and 8 of the clinic did not have any post for ward boys.

Chapter 1

Introduction and Survey Design

The present report is seventh in the series of the studies carried out by the Population Research Centre, Gokhale Institute of Politics and Economics, Pune from the list of the research studies given by the Ministry of Health and Family welfare, Department of Family Welfare, Government of India, New Delhi in 1998-99. The study primarily aims at evaluating the functioning of the RTI/STD Clinics in Maharashtra. The present report has been divided in two sections. In the first section, we have analyzed the data on the health-seeking behavior of men and women who were clinically tested positive for RTI/STI during the various Family Health Awareness Campaigns organized by the Maharashtra State Aids Control Society (MSAC) as per the guidelines of National Aids Control Society (NACO). In the second section we have evaluated the functioning of the RTI/STI Clinics in the State of Maharashtra.

1.1 Importance of the study

Creation of the demand for the reproductive health services has been one of the important components in the new RCH approach. As a central component of the reproductive health services, prevention of RTI and STI has become a major concern for the program managers. As a result of this, the Government of India has initiated several innovative schemes to provide better reproductive health services.

Despite great improvements in preventing and treating reproductive tract infections (RTIs) and sexually transmitted infections (STIs) have been spreading rapidly throughout the world. Similarly the HIV (AIDS) infections too have been on the rise. The problem of RTI, STI and HIV (AIDS) among women of the reproductive ages is increasing at an alarming rate. Having adverse effects upon the reproductive health and well being of both men and women, in developing countries like ours, issues of RTIs and STIs have become a major public concern. The emergence of HIV (AIDS) have made the prevention and management of RTIs and STIs even more important and urgent than ever before since RTI/STI have been found to facilitate the acquisition and transmission of HIV infection 5 to 10 times more compared to those who do not have RTI. Health researches have shown that early detection and effective treatment of RTI/STI of both partners need to be given high priority especially in rural areas and the urban slums where the prevalence of RTI/STI is higher. It has also been observed that the reduction in transmission of RTI/STI has considerable impact in reducing the spread of HIV (AIDS). Often people are ignorant about the RTI/STI infections as there is a sense of inhibition

Although several attempts at various levels have been made by both government and non-government agencies to enhance the awareness among the people about the HIV (AIDS), unfortunately, the levels of awareness of the rural population in general and that of the marginalized groups like Tribal in particular have not been satisfactory (MSACS, 2000). In view of this it was thus decided to take up the study regarding the health-seeking behavior of the men and women clinically tested positive for RTI/STI in the Tribal areas of Nashik district in Maharashtra.

With the view of establishing a system of community based diagnostic and treatment of RTIs and STIs, the National Aids Control Society (NACO) of India with the help of Maharashtra State Aids Control Society (MSACS) launched Family Health Awareness Campaign (FHAC) in a phased manner. At first, on a pilot basis the camps were organized in eight districts during April 26th to May 1st, 1999. The second round of the campaign was launched during December 1st to December 15th 1999 in 16 districts and 14 Corporations. Later, in the third round the campaign was extended to all the 33 districts and 14 Corporations in the state during June 1st to 15th, 2000. In the fourth round, the campaign was implemented in 20 districts and 14 corporations during second half of the April 2001. The records of these campaigns form the base for the present study.

1.2 Brief Note on the FHAC

The camps were organized at the village level to inform the consequences of RTI/STI and HIV (AIDS) and link it with the concept of family health. Before the commencement of these camps, the health workers in the area visited all the households in their respective areas and provided the target group (15-49 years of age) with a household contact card and also briefed them about the objectives of the campaign, date and place of camp. In order to ensure greater success of the program, multi (inter) sector (al) approach was adopted and all the available field staff of several constituencies of health and family welfare and other social sector schemes were used to mobilize people of the area to have greater participation. This included district media, district, blocks and village coordination committees, village leaders of Panchayat Samitis, teachers, Non-Governmental Organizations, Mahila Mandals and grass root level workers such as ANM, MPW, VHG, Trained Dais, Gram Save, Talatis, Volunteers of Nehru Yuvak Kendras and NSS etc. In addition to this, the local cable network television, local press and All India Radio were used to enhance the interpersonal communication and social mobilization drive more effectively. Special efforts were made to encourage greater participation of the male population in the campaign. One day training program for Govt. medical doctors, Private Practitioners and doctors practicing Indian System of Medicine of Homeopathy, Ayurveda, Siddha, Unani and Magic Healers, Quacks and Para Medical; was also organized to provide syndromic treatment of RTI/STI infections.

As defined in the various operational guidelines of the MSACS, the primary objectives of the campaign were to address the issue of RTI and STI among the people

and to contain the spread of RTI including STI and HIV (AIDS) and also to generate community participation. The specific objectives of the campaign were as follows:

1. To raise the level of awareness on RTI/STI and HIV (AIDS) in the rural areas and other vulnerable groups of the population.
2. To encourage health seeking behavior in the general population for RTI/STI.
3. To make the people aware about the services available in the public health system for the management of RTI/STI.
4. To facilitate early detection and prompt treatment of RTI and STI by streamlining the program with the infrastructure available under primary health care system.
5. To implement a focussed IEC strategy for male population.

1.3 Review of the Literature

With the emergence of HIV (AIDS) and focussed plan of action of ICPD 1994 women health issues, reproductive morbidity especially RTI/STI have been given greater attention by government of India under RCH program. It is estimated that nearly one third of the total disease burden in women of reproductive age group in the developing countries is linked to problems related to pregnancy, childbirth, abortion, RTI/STI and HIV (AIDS) and for these diseases cost effective interventions exist (Pachauri S and J Gittlesohn 1994, Pachauri 1997). There are now number of population based studies; syndromic as well as clinical, that indicate very high prevalence of RTI/STI symptoms among women in India (Bang and Bang 1989, Parikh 1996, Patel 1994, Bhattacharya 1994, Bhatia and Clealand 1995, Visaria 1995, 1998, Srinivas et. al. 1998, Ram and Shastri 2001, Ram et. al. 1997). The recently conducted National Family Health Survey in 1998-99 (IIPS 2000) and RHS-RCH in 1998-99 at district level (IIPS 2001) also indicate very high reproductive morbidity in Indian Women. The baseline survey conducted in Nashik district (Mulay et. al. 1999) indicates high prevalence of reported symptoms of RTI/STI in the district. The review of many populations based study (some of them incorporated syndromic as well as clinical examination) by Koeing et. al. (1996) indicates large variation in prevalence in morbidity from area to area. Despite this these studies have also shown very low level of treatment seeking among women. According to RHS-RCH, in India about 30 per cent of women reported at least one symptom of RTI/STI and only 38 per cent of them sought medical treatment. On the other hand, only 12 per cent of the men reported such prevalence but more than 55 per cent sought treatment. In case of Maharashtra the treatment seeking respectively for men and women was 48 and 69 per cent. In Nashik about 24 per cent of women reported at least one symptom and about 46 per cent sought treatment (Mulay et. al. 1999).

Integration of RTI/STI and CSSM program poses as much challenges to the end level service provider (ELSP) as to the program mangers. Majority of the ELSP are

neither oriented to talk about so called personal subject such as RTI/STI nor do they have adequate knowledge. Beside this, the facilities available for clinical examination and pathological test are very limited. Further, myths surrounding sexuality and sexual health prevent large number of men and women from talking and treatment seeking for any problems related to RTI/STI. In fact there is very little inter-spousal communication on these matters. The studies conducted in different parts of India do indicate that the inter-spousal communication in India on reproductive matters is very poor (IIPS 2000). Identification of RTI/STI among women and men through Syndromic Approach is probably the first important steps to bring the men and women into network of primary health care. The ELSP through this approach during their routine visits can segment the population and refer those who are most likely to have the problems for clinical examination and pathological test. In given cultural context, the precondition of most health-seeking behavior is the recognition of symptoms, its interpretations and related beliefs. It may also be mentioned that men's knowledge about RTI problems is very poor (Singh 2002). At the same time it is equally important to enhance male participation as well as to ensure that they are sensitive to these problems. For this, they have to be provided with the knowledge through health education or by the male health worker.

In view of very high reported symptoms of RTI/STI among women and very little treatment seeking, it becomes important to understand the role of awareness campaign in treatment seeking once women and men have reported symptoms or have been clinically confirmed that they have RTI/STI.

1.4 Objectives of the present study

The main objectives of the present study are as follows:

- 1. To find out the opinion of the men and women about the Family Health Awareness Campaign organized by the State Health and Family Welfare Department.**
- 2. To assess the knowledge and perceptions of men and women who were clinically tested positive for one or more RTI/STI infections about on RTI, STI and HIV (AIDS).**
- 3. To examine the health-seeking behavior of the men and women who have either suffered in the past or are presently suffering from RTI/STI.**
- 4. To find out the knowledge and use of family planning practices.**
- 5. To find out the knowledge, availability and accessibility of health and family welfare services of the respondents.**
- 6. To assess the availability of various facilities at the RTI/STD Clinics located in various District Hospitals in Maharashtra.**

1.5 Study design and Sample Size

At the first stage of selection, four Community Development Blocks (CDBs) in the district with the larger share of ST population were selected. The selected CDBs are- Peint, Dindori, Igatpuri and Nashik. The percent share of the ST population in the total population of the CDBs in these blocks in 1991 was 95, 52, 49 and 40 per cent respectively. At the second stage, 8 PHCs from the blocks selected in the first stage were selected on the basis of concentration of Tribal population in the total population. The selected PHCs are: Girnare and Trimbak from Nashik, Harsul from Peint and Umrare, Dindori and Varkheda from Dindori and Ghoti, and Kaluste from Igatpuri block and all of the 55 Camps held under the selected PHCs were considered for identifying the respondents to be interviewed for the present study. Thus the sample for the present study essentially comprised that of the rural population.

Once the PHCs were selected, list of the persons who attended the FHAC camps and were screened positive for RTI/STI was obtained from the Medical Officer, District Training Team, Nashik and the necessary information was copied from the records in order to facilitate the fieldwork. It may be mentioned that in all there were 109 men and 842 women in the selected PHC areas who were screened positive for RTI/STI infections during these camps. An attempt was made to contact each and everyone who screened positive. However, after spending almost two months in the field and with great efforts of the field investigators (which include frequent repeat visits to the house) we could interview 23 men and 461 women (that is about 21 and 55 per cent the total men and women respectively). Further, a conscious decision was taken to cover both the spouses in the fieldwork in order to obtain a complete and more holistic picture on the issue. With this background we tried to contact all those people who tested positive for RTI/STI (109 men and 842 women) along with their spouses. However, as mentioned before with great difficulty we could interview in all 468 women and 220 men. It was even harder to get the men for interview as many of them had gone out for work. Thus, the present analysis is based on 468 women and 220 men respondents.

With regards to the sixth and last objective of the study, we have selected 14 RTI/STD Clinics covering half of the districts in the state.

1.6 Survey Instrument

Structured questionnaires, separately for men and women clinically were used for gathering the necessary information for the present study. In addition to this, a separate questionnaire was used to gather information on various aspects of functioning of the RTI/STI clinics. All of the questionnaires are enclosed at the end of this report. It may be mentioned here that the questionnaires were finalized after the pre test.

1.7 Field Work

The fieldwork for the present study was carried out during April-May 2001 with the help of four male and female field investigators under the constant supervision of the project coordinator. The investigators were given two days training prior to the commencement of the fieldwork. It may be mentioned here that the investigators stayed at the PHC head quarter throughout the fieldwork.

1.8 Profile of the District and Selected Community Development Block

It may be mentioned at the outset that since the sample for the present study comes from the rural areas of the district, in this section, we intend to compare some of the indicators for the rural population of the selected CDBs for that of the rural population of the district for the census year 1991. The relevant data for this is given in Table 1.1 below. However before commenting on the data in the table we very briefly discuss the 2001 census results for the district in the context of the state of Maharashtra.

According to the 2001 census, about 49,87,923 persons (accounting for nearly 5.16 per cent of the total state population) live in the Nashik district of which nearly two-thirds live in the rural areas. The district has many unique features. For example, the district registered a relatively faster growth of its population during 1991-2001 as compared to the state average. The population density (number of persons per square kilometer land) was lower in Nashik (248 as against of 314 for the state). The overall sex ratio of the population in the district was slightly better than the state (924 as against of 922). The 2001 census results reveal that about one-thirds of the total population of the district in 2001 belong to the scheduled castes (about 8.5 per cent) and scheduled tribes (24.2 per cent). In terms of other indicators like literacy rates, work participation rate etc. the district is very close to the state average.

It may useful to note that out of the district's total rural population nearly 27 per cent in 1991 lived in the four selected blocks (the corresponding share has slightly come down to about 23 per cent in 2001). Further, two blocks namely Peint and Dindori were completely rural block (true for 2001 as well) whereas nearly 81 per cent of the population of Igatpuri and only about 19 per cent of the Nashik block population in 1991 was rural (the corresponding figures for 2001 are: 22.67 and 86.71 per cent respectively).

Coming to the data in Table 1.1 it may be observed that of the four selected blocks, during 1981-91, Dindori recorded highest growth of its rural population (31.98 per cent) followed by Peint block (29.36 per cent). On the other hand, the decadal growth rate for rural population was about 12 per cent for Igatpuri block, whereas it was negative in Nashik block (-8.65 per cent). The data also reveals that in comparison to the district average (955), the over all sex ratio of the rural population was slightly better in Peint (989) and Dindori (962) whereas it was on the lower side for Nashik (950) and Igatpuri

(946) blocks¹. It is also noted that SC and ST together constitute about 42 per cent of the rural population of the district. Further, about 95 per cent of the rural population of Peint block belonged to ST whereas it ranged between 41 to 52 per cent in case of other three blocks.

Nearly half of the rural population of the district in 1991 was illiterate, as the per cent of literate in the rural population was about 53 per cent (the corresponding figure for 2001 is 69 per cent). The situation is worse, when we look at the literacy status of either rural females or the ST population. As may be noted, only 39 per cent of the rural females in 1991 were literate. Out of the total ST population living in the rural areas of the district, a little over a quarter was literate, whereas remaining other were illiterate. The corresponding figure for ST females was 16.4 per cent. It is also noted that nearly one half of the rural women in the district in 1991 were economically active. With regards to the blocks, it may be said that the literacy rates were lowest for Peint followed by Dindori block whereas they were relatively better for Nashik and Igatpuri blocks. As one would expect, the literacy rates were very low for ST (total as well as female population) in all the blocks as compared to the total population.

In the same table we have also included information on the selected indicators reflecting on the availability of the selected basic civic and infrastructural amenities in the village and for the households from the 1991 census. At the outset we may mention that since the per cent of villages in the district having access to safe drinking water and an educational facility within the village in 1991 was 100 per cent and hence we have not given it in the table. It may be observed that nearly two-thirds of the villages in the district were connected to pucca road. About 58 and 63 per cent of the villages in the district had medical facility and post and telegraphic services whereas about 88 per cent had accessibility to communication facility. The per cent share of villages having a medical facility was lowest at 23 per cent in Peint followed by Nashik (49 per cent) whereas it was 100.00 per cent in Igatpuri. With respect to the P & T, the data reveal that the per cent of villages with this facility ranged between 35 per cent in Igatpuri to about 79 per cent in Dindori. The corresponding range for the villages with communication facility was between 59 per cent in Peint to 88 per cent in Dindori. Once again, the per cent of villages connected with pucca road was lowest in Peint (44 per cent) whereas in case of other blocks it varied between 61 to 75 per cent.

The data in the last panel of the same table indicate that over 70 per cent of the rural houses in 1991 in the district were electrified. The per cent of electrified houses was lowest for Peint (23 per cent) followed by 51 per cent in Dindori. On the other hand, about 63 and 76 per cent of the rural households in Nashik and Igatpuri blocks respectively were electrified. Though the per cent of households having sanitation facility

¹ The 2001 census has revealed deterioration in the over all sex ratio of the district in rural areas as the ratio has come down to 945 females for every 1000 rural males as compared to the 955 in 1991 (a decline of 10 points). In case of blocks, it is noted that the over all sex ratio in rural areas has become more unfavorable to females in 2001 in Nashik and Peint blocks (the rural sex ratio in these two blocks have declined by 30 and 38 points respectively in 2001 as compared to the 1991 levels). On the other hands, it has improved by 30 points in Dindori and by 11 points in Igatpuri in 2001 (the observed rural sex ratio in Nashik and Igatpuri in 2001 was 957 and 992 females for every 1000 males respectively).

was about 23 per cent for the rural Nashik as a whole, their share was about 2 to 6 per cent in the selected blocks. Further, nearly 64 per cent of the rural households in the district in 1991 had accessibility to safe drinking water, however, their share was a mere of 15 per cent in Peint, 22 per cent in Igatpuri and 37 per cent in Nashik. On the other hand, about two-thirds of the rural households in Dindori blocks had access to safe drinking water. Very few of the rural households used LPG for domestic cooking.

Table 1.1: Comparison of the Selected variables for rural areas for the selected community development blocks with Nashik and Maharashtra, 1991.

	Name of Community Development Block				Nashik district
	Nashik	Igatpuri	Peint	Dindori	
Population	161708	163677	128019	208229	2482267
Area in sq. kms. ²	929.32	1006.97	920.77	1323.20	15011.74
Per cent change in population during 1981-91	-8.65	+11.52	+29.36	+31.98	+20.29
Population density (per sq. km. of area)	174	163	139	157	165
Sex Ratio (males per 1000 females)	950	946	989	962	955
Literacy rate (excluding 0-6)	49.04	42.81	31.11	53.68	53.28
Female Literacy Rate (excluding 0-6)	34.05	25.34	19.88	39.39	38.94
Literacy rate for ST population (excluding 0-6)	23.75	28.64	28.62	34.83	27.89
Female Literacy Rate for ST pop'n (excluding 0-6)	11.40	15.50	17.31	21.27	16.42
Female Work Participation Rate ¹	45.70	49.08	54.07	49.86	49.19
Per cent Schedule Caste population	9.43	7.51	0.82	6.69	7.21
Per cent Schedule Tribe population	40.80	48.44	94.95	51.93	34.53
Per cent village with medical facility	49.01	100.00	23.02	75.46	58.87
Per cent village with Post & Telegraph facility	62.62	35.44	41.80	78.59	63.20
Per cent village with Communication facility	83.94	77.74	58.98	87.82	88.48
Per cent village with Approach by Pucca Road	75.10	66.09	44.38	60.54	63.82
Per cent houses electrified	62.80	75.61	23.35	51.24	72.36
Per cent households having sanitation facility	5.07	3.12	1.77	5.75	23.32
Per cent households safe drinking Water	36.73	22.10	15.05	66.78	63.54
Per cent households LPG/electricity for cooking	5.30	1.14	4.22	0.44	4.40

¹ main and marginal workers

1. District Census Handbook-Nashik, Part XII-A and B. 1995. Series-14 Maharashtra, Census of Maharashtra, 1991. Directorate of census operations, Maharashtra.
2. Tables on Houses and Household Amenities, Part VII. 1993. Series-14, Maharashtra, Census of Maharashtra, 1991. . Directorate of census operations, Maharashtra.

Chapter 2

Profile of the Surveyed Households and Respondents

The present chapter puts forth profile of the households as well as of the women and men covered in the present study. At the household level, data on the various basic amenities such as source of drinking water, light, sanitation facility, type of house etc. have been collected. We have also analyzed data on the selected social, economic and demographic characteristics of the interviewed women and men. This includes data on the present age of the respondent, age at marriage, age at effective marriage, number of living and dead children by sex of the child, reproductive wastage, educational status, participation of the respondent in economic activity, their exposure to various types of mass media etc.

2.1 Profile of the Surveyed Households

First we present a very brief profile of the households to which our respondents belong. Accordingly in Table 2.1 we have given the relevant data on the selected characteristics of the households. It may be seen from the table that around 30 per cent of the women and men respondents live in Kachcha houses whereas another a little over 56 to 58 per cent live in semi-pucca houses. The remaining 12-13 per cent of the respondents live in pucca houses. Tap water is available for drinking purposes to about half of the women and men respondents whereas about 40 to 42 per cent of the respondents reportedly get drinking water from well. Over 94 per cent of the surveyed households did not have any sanitation facility as a mere of 3 per cent of the women respondents and about 6 per cent of the men respondents said that they had toilet facility within homes.

Table 2.1: Background characteristics of the households of the respondents.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
A: Type of House				
Kachcha	146	31.20	64	29.09
Semi-Pucca	263	56.20	127	57.73
Pucca	59	12.60	29	13.18
B: Source of Drinking Water				
Tap	228	48.72	112	50.91
Well	199	42.52	87	39.55
Tube Well	21	4.49	-	-
Canal/River	20	4.27	21	9.55

Table 2.1 continued.....

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
C: Source of Water for other Purposes				
Tap	174	37.18	88	40.00
Well	230	49.15	100	45.45
Tube Well	20	4.27	-	-
Canal/River	44	9.40	32	14.55
D: Availability of Toilet Facility				
No facility/Open Fields	453	96.79	207	94.09
Facility within Home	15	3.21	13	5.91
Number of Households	477	100.00	220	100.00

2.2 Socio-economic and Demographic Characteristics of the Respondents

The data on the selected social, economic and demographic characteristics of the respondents like age at the time of survey, current marital status, age at marriage, age when they started living with the husband, educational and working status, number of living children at the time of survey are analyzed in this section. In addition to this, data on child loss and pregnancy wastage have also been discussed in the same section.

2.2.1 Present age and age at marriage

As may be seen from Table 2.2 that the mean age of the women respondent is 30.68 years whereas in case of men respondent it is 35.90 years. About 4 per cent of the women respondents were aged 19 years or less and another about 17 per cent were aged 20-24 years. Nearly 15 per cent of the women were 40 years or older. Over 95 per cent of the women respondents and about 99 per cent of the men respondents were currently married. Three of the men respondents were never married.

The mean age at marriage works out to be extremely low for both women and men respondents (14.90 and 18.61 years respectively). As may be seen, over 88 per cent of the women and about 93 per cent of the men respondents were married before the minimum legal age at marriage. In fact, over 47 per cent of the women married before reaching age 15 years. Further, there is hardly any difference between the age of marriage and age of effective marriage for either women or men respondents in the study population.

Table 2.2: Distribution of the respondents by current age and age at marriage.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Present Age of the Respondent				
Below 20 years	19	4.06	-	-
20-24 years	79	16.88	11	5.00
25-29 years	126	26.92	38	17.27
30-34 years	92	19.66	51	23.18
35-39 years	84	17.95	47	21.36
40 years or more	68	14.53	73	33.18
Mean age of the respondent	30.68		35.90	
Present Marital Status				
Currently Married	445	95.09	217	98.64
Widowed/Divorced/Separated	23	4.91	-	-
Never Married	-	-	3	1.36
Age at the time of marriage*				
Before legal age at marriage	413	88.25	205	93.19
After legal age at marriage	55	11.75	12	5.46
Not Applicable/Unmarried	-	-	3	1.35
Mean age of marriage	14.90		18.61	
Age at the time of effective marriage*				
Before legal age at marriage	413	88.25	205	93.19
After legal age at marriage	55	11.75	12	5.46
Not Applicable/Unmarried	-	-	3	1.35
Mean age of effective marriage	15.00		18.53	
Total	468	100.00	220	100.00

* The legal age at marriage for girls and boys in India is 18 and 21 years respectively.

2.2.2 Living Children, Child Loss and Pregnancy wastage

The mean number of living children for the population under study works out to be 2.90 children per woman. The mean number of sons and daughters was 1.52 sons and 1.40 daughters per woman. In terms of the proportion of children by the women, it may be observed from the data in the Table below that about 8 per cent of the women respondent did not have any living child at the time of survey and another about 10 per cent of them had one living child. On the other hand, nearly 36 per cent of the women had 3 living children while another about 19 per cent had 4 or more living children indicating prevalence of relatively higher levels of fertility in the sample population.

Fig. 2.1 : Distribution of respondents by Current Age

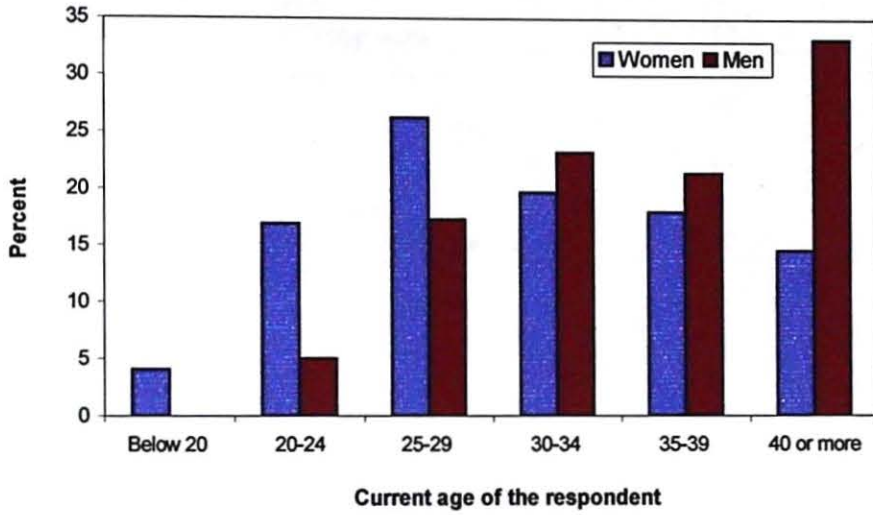


Fig.2.2 Distribution of respondents marrying before and after completing the legal age at married

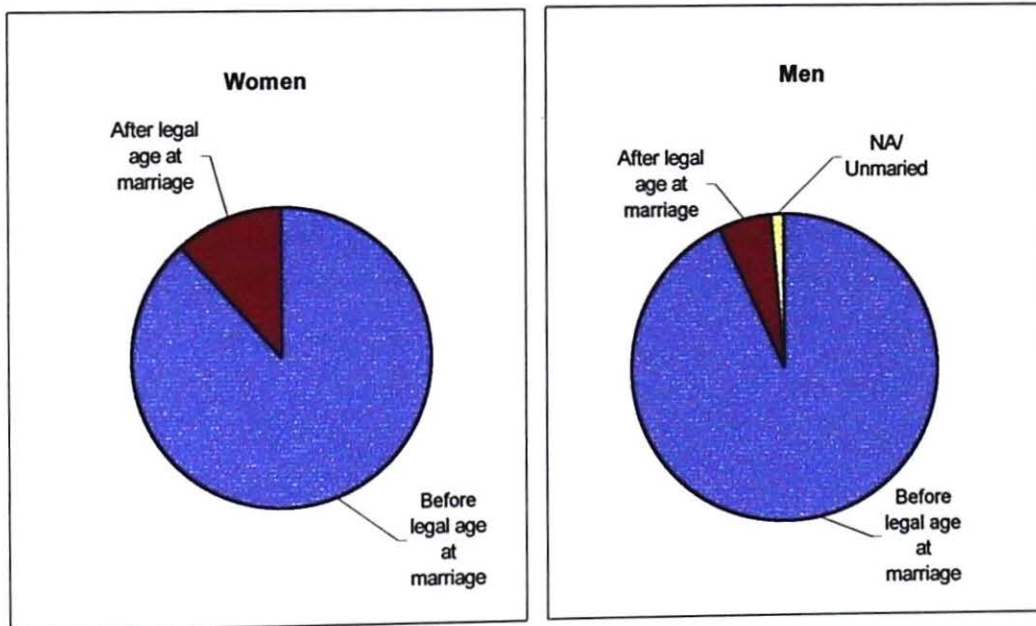


Table 2.3: Distribution of the women by the number and sex of the living children.

Name of the Variable	Number	Percent
Number of Male Living Children		
No son	79	16.88
One son	137	29.27
Two sons	201	42.95
Three or more sons	51	10.89
Mean number of living sons	1.52	
Number of Female Living Children		
No daughter	109	23.29
One daughter	171	36.54
Two daughters	120	25.64
Three or more daughters	68	14.53
Mean number of living daughters	1.40	
Number of Living Children		
No child	36	7.69
One child	45	9.62
Two children	76	16.24
Three children	167	35.68
Four children	90	19.23
Five or more children	54	11.54
Mean number of living children	2.90	
Total	468	100.00

In case of distribution of women by number of living sons and daughters, it may be noted that nearly one-sixth of the women did not have any living sons at the time of survey whereas share of women with no living daughter was close to one quarter. More than half and 40 per cent of the women had two or more living sons and daughters respectively. Further the data reveal that nearly 18 per cent of the women in the sample had suffered one or more child loss prior to the survey (Table 2.4). Of the women who suffered any child loss, nearly one-third lost two or more children. Further, one in every 10 women in the sample had had a still birth and about 5 to 6 per cent each had spontaneous or induced abortion (Table 2.5).

Table 2.4: Distribution of the respondents by number and sex of dead children.

Name of the Variable	Sons		Daughters		Children	
	Number	Percent	Number	Percent	Number	Percent
Suffered child loss	NA	NA	NA	NA	82	17.52
None	22	26.83	44	53.66	-	-
One child loss	45	54.88	30	36.59	52	63.41
Two or more children	15	18.30	8	9.76	30	36.59
Mean	1.00		0.67		1.66	
Total	82	100.00	82	100.00	82	100.00

Table 2.5: Distribution of the women by reproductive wastage.

Name of the Variable	Number	Percent
Experienced Still birth	44	9.40
Number of Still Births		
One	35	79.55
Two	6	13.64
Three	4	6.82
Total	44	100.00
Experienced Spontaneous Abortion	28	5.98
Number of Spontaneous Abortion		
One	23	52.27
Two	4	9.09
Three	1	2.27
Total	28	100.00
Experienced Induced Abortion	23	4.91
Number of Induced Abortion		
One	18	NC
Two	4	NC
Three	1	NC
Total	23	NC
Total	468	

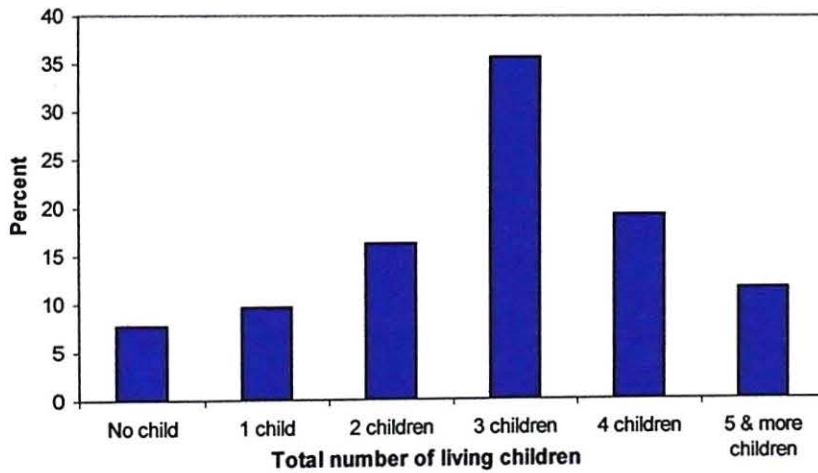
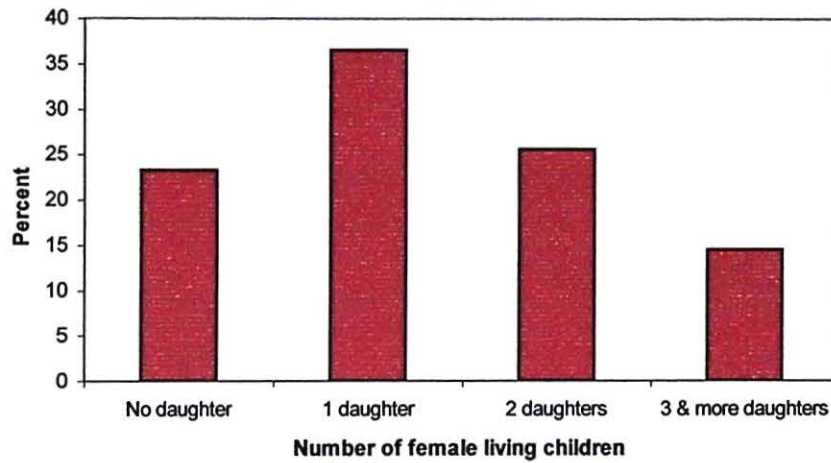
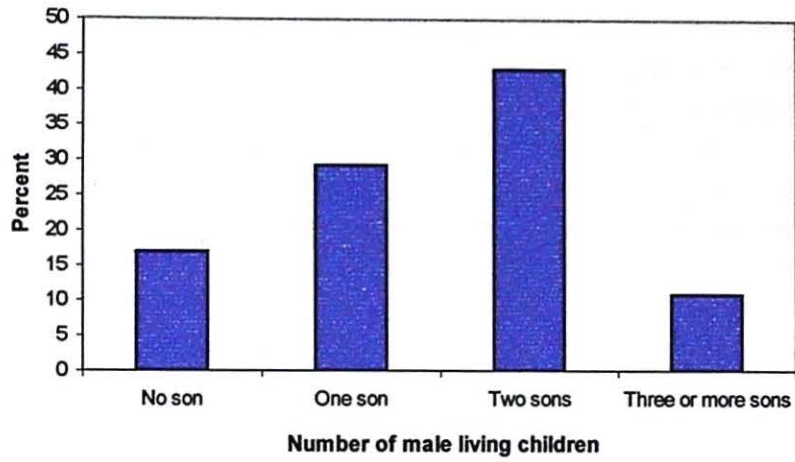
2.2.3 Current Fecundity Status of the Women

It may be noted from the table below that about 4 per cent of the women interviewed were pregnant at the time of survey whereas another about 5.6 per cent were in PPA. Further, about 7 per cent of the women were in menopause whereas one woman had had her uterus removed. The remaining about 83 per cent of them were menstruating at the time of survey.

Table 2.6: Distribution of the women by their fecundity status at the time of survey.

Name of the Variable	Number	Percent
Currently Pregnant	19	4.06
In PPA	26	5.56
Currently Menstruating	389	83.12
In Menopause/Had Hysterectomy	34	7.26
Total	468	100.00

Fig. 2.3 : Distribution of respondents by number and sex of the living children



2.2.4 Socio-Economic Characteristics of the Respondents

The Table 2.7 given below gives relevant data on the socio-economic characteristics of the respondents. As one would expect, almost two-thirds of the women respondents had no formal schooling. Of the remaining 158 women who were literate, majority had fewer than 8 years of schooling. The men respondents in this respect seem to be slightly better off as relatively smaller proportion of them (about a quarter) did not go to school. Further over 30 per cent of the total men respondents have completed 8 or more years of schooling (as against of about 11 per cent of women respondent).

Coming to the economic participation of the respondents, the data reveals that only about one-sixth of the women respondents were housewives whereas remaining all others were involved in some economic activity. Nearly 43 per cent of the women and about 45 per cent of the men respondents were working on their own land whereas another 38 per cent of the women and about 30 per cent of the men were working as laborers on someone else's land. The share of self-employed was merely 4 per cent in case of women whereas in case of men they constituted about one-quarter of the respondents. Further, it may be noted that though majority of the women respondents were economically active only about half of them were getting paid for the work they were doing. The situation was no different for men as about 55 per cent of the economically active men were getting paid in cash for the work they were doing. Further, about 15 per cent of the economically active men reported that they have to go out of village for nearly a week in a month for the work.

Table 2.7: Distribution of the women by the selected socio-economic characteristics.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Years of Schooling Completed				
No Schooling (Illiterate)	310	66.24	60	27.27
1-4 years	46	9.83	51	23.18
5-7 years	61	13.03	42	19.09
8 or more years	51	10.90	67	30.45
Occupation				
Housewife/House Husband	75	16.03	-	-
Works on Own Land	200	42.74	100	45.45
Works on Other's Land	176	37.61	67	30.45
Self employed*	17	3.63	53	24.09
Paid Cash for work	199	50.64	120	54.55
Those who work, whether travel				
Never	391	99.49	185	84.09
One week in a month	2	0.51	32	14.55
Two weeks in a month	-	-	3	1.36
Total	468	100.00	220	100.00

* Tailoring/Bhaji Vender/Cook = Self Employed

2.3 Exposure to Mass Media

Table 2.8 gives the distribution of men and women by the exposure to various types of mass media. At the outset it appears that the women and men covered in the present study have very limited exposure to different types of mass media. It may be noted from the table that only one in every five women (about 18 per cent) reportedly read news paper once a week while every second man reported that he reads news paper once a week. Further, only about a quarter and one-third of women and men respectively reported that they listen to radio at least once a week. Television seems to be reaching to relatively larger proportion of women and men as about one third of the women and half of the men told that they watched TV at least once a week. Going to cinema hall for watching movies is rather uncommon as only handful of men and women told they watched at least one movie in theatre in a month.

Table 2.8: Distribution of the respondents by the exposure to various types of mass media.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Reads news paper once a week	85	18.16	103	46.82
Listens to radio once a week	113	24.15	76	34.55
Watches Television once a week	147	31.41	110	50.00
Go to Cinema hall once a month	21	4.49	20	9.09
Total	459		220	

Chapter 3

Knowledge and Use of Family Planning Methods

In the present survey, we have collected information on various aspects of family planning practices that include knowledge level of the respondents regarding selected modern methods of family planning, Medical Termination of Pregnancy (MTP), current use, source of supply of the selected family planning methods, reason for current non-use of family planning, future intentions of family planning use etc. In addition to this, we have also collected information regarding the preferred method of family planning from the male respondents. The results on these aspects are analyzed in this chapter

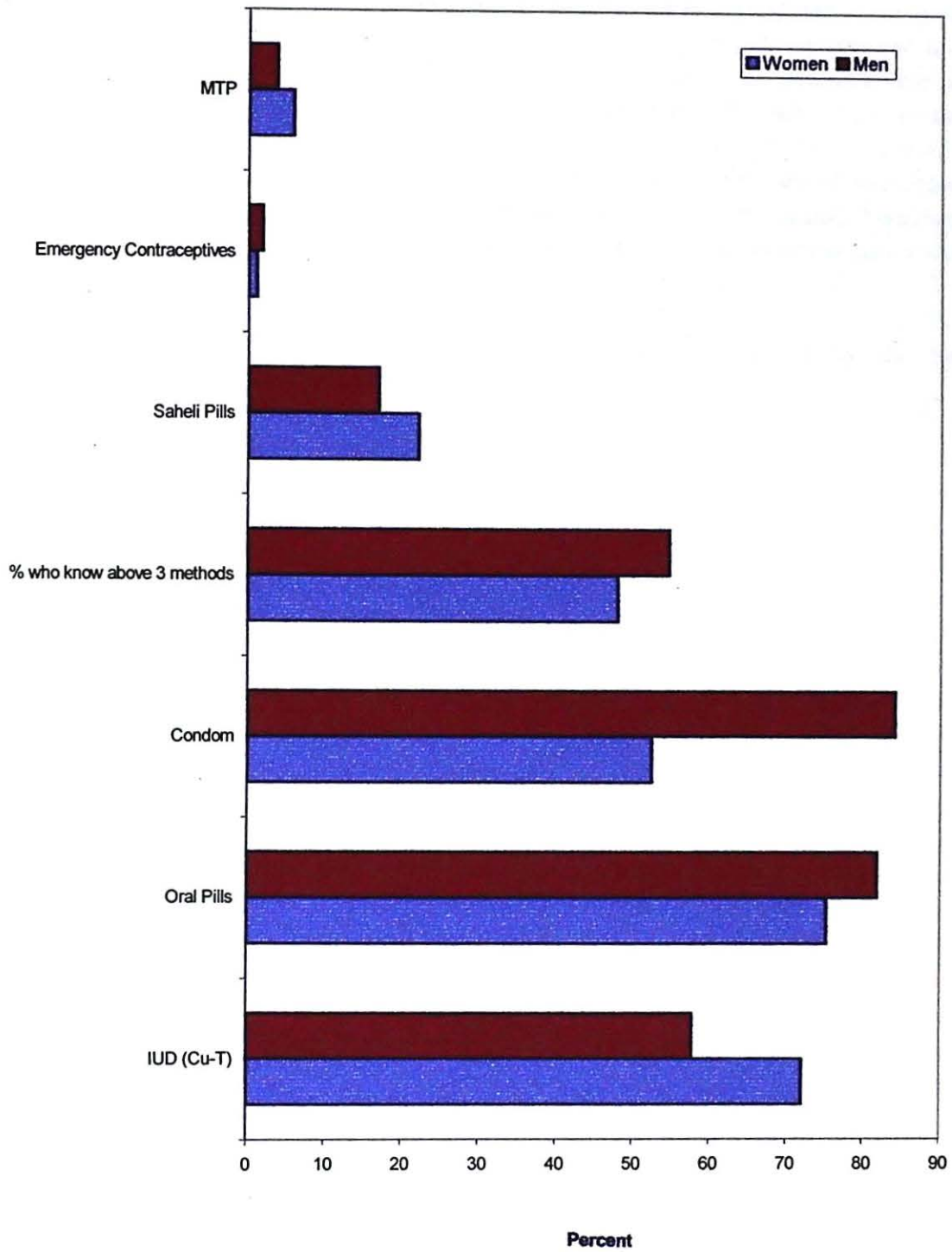
3.1 Knowledge of Family Planning Methods

Table 3.1 gives data regarding the knowledge of respondents of the modern spacing methods of family planning and Medical Termination of Pregnancy (MTP). At the outset it may be mentioned that here we included only five modern spacing methods (IUD also known as Cu-T, Oral Pills, Condom, Saheli Pill (weekly pill) and Emergency Contraceptives). We did not include male and female sterilization as the knowledge of these two methods in the study area is universal (Mulay et. al. 1999).

Table 3.1: Knowledge of Family Planning Methods among Respondents.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Per cent know following methods				
IUD (Cu-T)	337	72.01	127	57.73
Oral Pills	352	75.21	180	81.82
Condom	245	52.35	185	84.09
Per cent know above 3 methods	224	47.86	120	54.55
Saheli Pills	103	22.01	37	16.82
Emergency Contraceptives	5	1.07	4	1.82
Medical Termination of Pregnancy	27	5.77	8	3.64
Total number of respondents	468		220	

Fig. 3.1 : Distribution of respondents by knowledge of the selected methods of family planning and MTP



The data clearly reveals that Cu-T and Oral Pills are known to about 72 and 75 per cent of the women respondents respectively whereas only about a half knew about Condom. Saheli Pill was known to only about one-fifth of the women respondents. It may further be observed that over 84 per cent of the men knew about Condom and Oral Pill was known to about 82 per cent. However, the knowledge of Cu-T seemed to be relatively poor, as only about 58 per cent of the men reportedly knew about the method. Further, a little less than half of the women and about 55 per cent of the men knew about IUD, OP and Condom. About one-sixth of the men knew about Saheli Pill. Only about one per cent of men and women each knew emergence Contraceptives. The knowledge of about Medical Termination of Pregnancy (MTP) too seem to be very poor among both men and women as only about 6 per cent of the women and about 4 per cent of the men knew about MTP.

3.2 Knowledge of Modern Spacing Methods Family Planning by the Selected Characteristics of the Respondents

Table 3.2 below gives the distribution of men and women who know the selected methods of family planning by their selected background characteristics such as age, educational status of the respondents and their exposure to various types of mass media. It appears from the data in the table 3.2 that relatively fewer proportions of younger women as compared to their older counterparts did not know about IUD, Oral Pill or Condom. For example, approximately 16 per cent of the women aged below 20 and 20-24 years did not know about any of the three methods. The share of women who were unaware of any of the three methods increased slightly to about 20 per cent in the women aged 25-29 and 30-34 years and further to 27 per cent among 40 years or older. Even though majority of the men in the other age groups knew about these methods nearly quarter of the men 40 years or older did not know about any of the three methods. Similarly, the per cent of women respondents who knew all the methods was highest for the younger ages as compared to the older age groups. This was true for both men and women respondents. Further, the per cent of women and men knowing at least one of the three methods was quite similar across various age groups.

With respect to the educational status of the respondents, it may be noted from the second panel of the same table that the per cent of respondents who did not know any of the three methods declined consistently with the advancement in the educational status. This holds true for both men and women respondents separately as well. For example, nearly a quarter of the illiterate women and about 32 per cent of the illiterate men did not know any of the three methods which declined to 17 and 8 per cent respectively for those who have completed 1-4 years of schooling. The per cent of women and men not aware of any of the three methods was just 2 and 3 per cent respectively for those with 8 or more years of schooling. Similarly, per cent of respondents who knew all the three methods increased

sharply from 38 per cent among illiterate women to 57-58 per cent among those who had 7 or less years of schooling to further over 86 per cent for those who had 8 or more years of schooling. The corresponding increase was from 28 per cent among illiterate men to over 85 per cent among those with 8 or more years of schooling. Thus it very clearly comes out that the educational status of the respondents does have an impact on the knowledge level of the respondents, when it comes to the modern spacing methods of family planing.

Table 3.2: Knowledge of Family Planning Methods by social, economic and demographic characteristics.

Name of the Variable	Women				Men			
	Know all 3	Know 1 of 3	Know none	Total	Know all 3	Know 1 of 3	Know none	Total
Age of the Respondent								
Below 20 years	42.1	42.1	15.8	19	-	-	-	-
20-24 years	59.5	24.1	16.5	79	63.7	36.4	-	11
25-29 years	52.4	27.8	19.8	126	65.8	34.2	-	38
30-34 years	41.3	39.1	19.6	92	56.9	35.3	7.8	51
35-39 years	42.9	35.7	21.4	84	41.1	31.9	6.4	47
40-44 years	42.6	30.9	26.5	68	54.5	34.2	24.7	73
Years School'g completed								
None/illiterate	38.1	37.7	24.2	310	28.3	40.0	31.7	17
1-4 years	58.7	23.9	17.4	46	41.2	51.0	7.8	21
5-7 years	57.4	24.6	18.0	61	59.5	40.5	-	25
8 or more years	86.3	11.8	2.0	51	85.1	11.9	3.0	57
Exposed to:								
New Paper/Radio/TV	88.2	9.8	2.0	51	92.3	3.8	3.8	52
Any of four* media	66.7	19.7	13.6	132	52.2	43.3	4.4	90
None	31.9	41.4	26.7	285	32.1	43.6	24.4	78
Total	47.9	31.8	20.3	468	54.5	34.1	11.4	220

* Reads news paper once a week, watches TV once a week, listens to radio once a week, goes to cinema theatre to watch film once a month

Like education, exposure of the respondents to various types of mass media such as news paper, radio, television, films and theatre too is expected to influence the awareness level of men and women with respect to spacing methods of family planning and our data too support this. As may be seen from data in the last panel of the table 3.2 that the awareness level of women and men is much higher among those who had been exposed to one or more types of mass media as compared to those who had not had any exposure. For example, 88 per cent of women and over 92 per cent of men who were exposed to either radio, television and news paper knew all the three methods as compared to their counterparts who had no

Fig. 3.2 : Distribution of respondents by knowledge of family planning methods & education

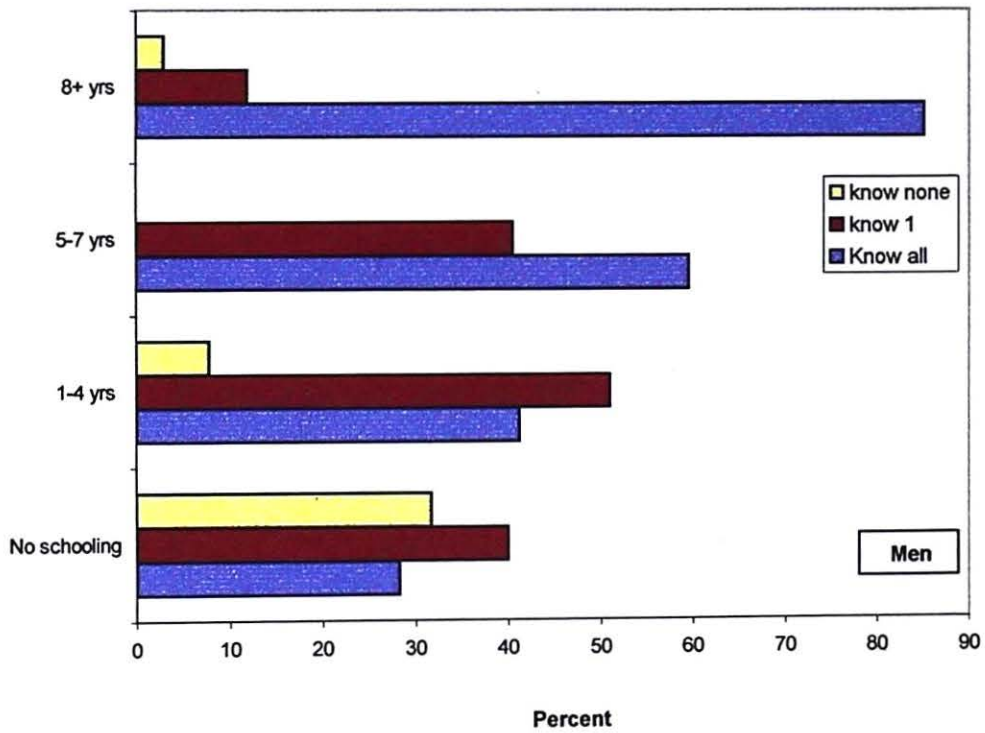
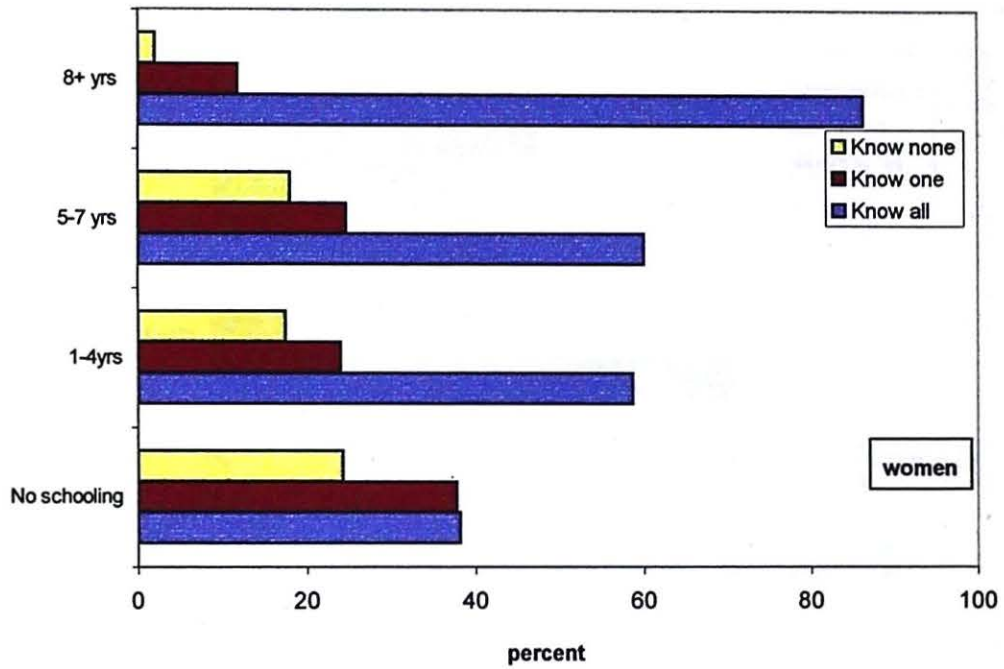
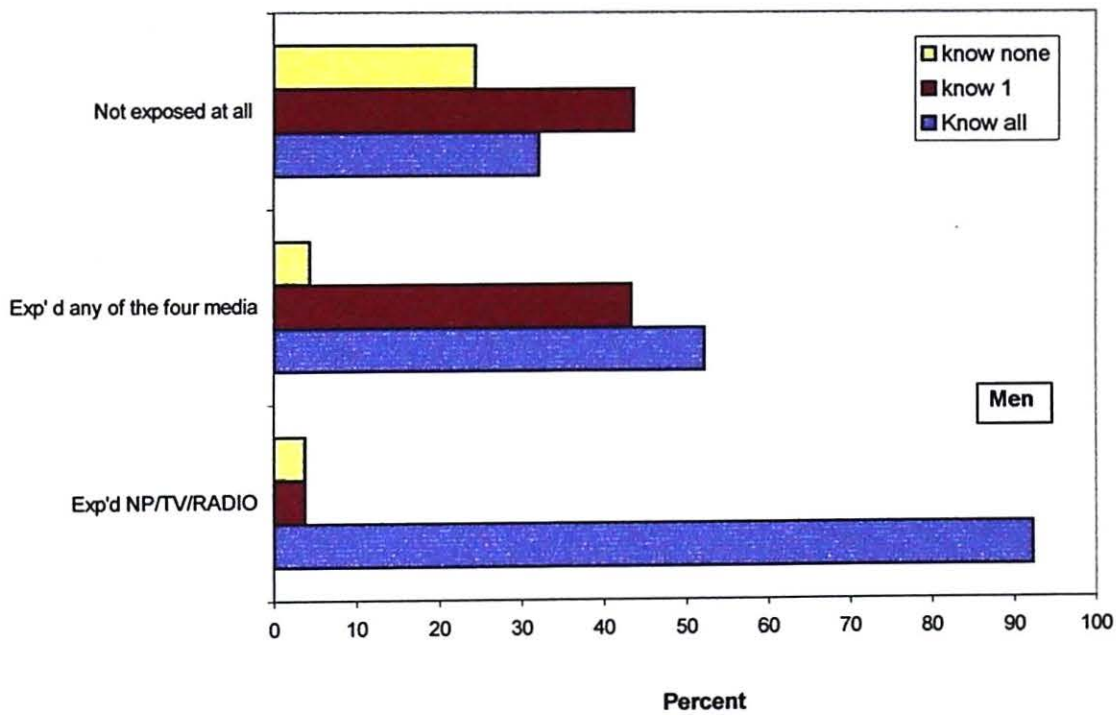
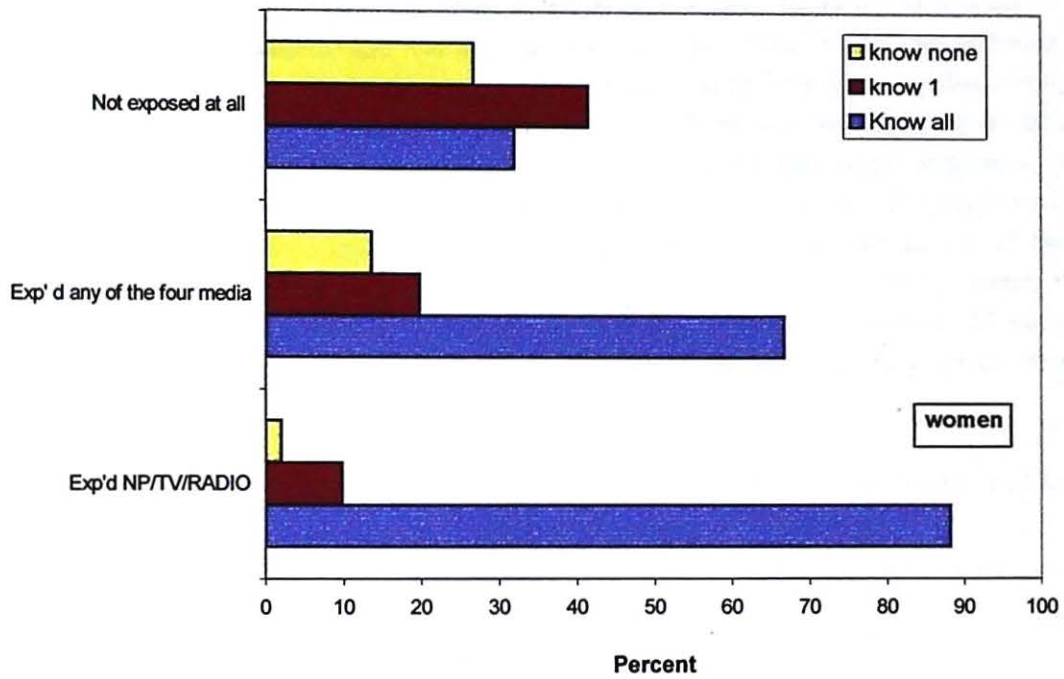


Fig. 3.3 : Distribution of respondents by knowledge of Family Planning methods & exposure to mass media



exposure (32 per cent each). Contrary to this, about a quarter of women and men each not exposed to any kind of mass media did not know any of the three methods as compared to only 2 and 4 per cent of women and men respectively.

Table 3.3 below gives the level of awareness among women respondents by the number of living children and the reproductive wastage (Still births, spontaneous and induced abortion) at the time of survey. It may clearly be seen from the table that among the women with no living child at the time of survey, about 28 per cent did know any of the three methods; the percentage declined to about 13 and 15 per cent respectively for those with one and two living children and increased thereafter slightly. This means that the women without any living child are more ignorant about spacing methods. In other words, use of spacing method before any child is very infrequent. On the other hand the per cent of women aware of all the three methods was highest among those with two living children (61 per cent) followed by those with one living child (56 per cent) and was relatively lower for other women.

Table 3.3: Knowledge of Women of the Selected Spacing Methods by Number of Living Children, Still births, Induced and Spontaneous Abortions.

Name of the Variable	Women			
	Know all 3	Know 1 of 3	Know none	Total
Number of living children				
No living child	38.9	33.3	27.8	36
One living child	55.6	31.1	13.3	45
Two living children	60.5	23.7	15.8	76
Three living children	45.5	33.5	21.0	167
Four or more living children	43.8	34.0	22.2	144
Had Still Birth				
Yes	36.4	36.4	27.3	44
No	49.1	31.4	19.6	424
Had Spontaneous Abortion				
Yes	57.1	25.0	17.9	28
No	47.3	32.3	20.5	440
Had Induced Abortion				
Yes	43.5	21.7	34.8	23
No	48.1	32.4	19.6	445
Total	47.9	31.8	20.3	468

With regards to the knowledge of any of the three spacing methods and reproductive wastage of the women though based on relatively smaller number it may be noted that the knowledge was poorer among those who had a still birth (27 per cent) as compared to those with no still birth (20 per cent). The corresponding figures were 35 and 20 per cent

respectively for those with and without induced abortion. It is important to note that about 43 per cent of the women who had induced abortion as against of 48 per cent who did not have any induced abortion were aware of all the three methods of spacing. The data also reveals that the per cent of women with and without spontaneous abortion unaware of any of the three methods was 18 and 20 per cent respectively. On the other hand, of the women who experienced spontaneous abortion, majority were aware of all the three methods.

3.3 Knowledge of Place for Cu-T, Oral Pills and Condoms

Respondents who were aware of Cu-T, OP and Condoms were further asked about the place where one could get these methods. It was observed that all of the respondents knew at least one place from where one could get IUD and the results are provided in the Table 3.4 below. As may be seen from the table, a little less than 70 and 80 per cent of the women and men respectively told that it was available at the PHC. Similarly, about 56 and 61 per cent of the women and men respectively reported that it was available at the ANM at the sub-centre. Only a few of men and women respondent told that the IUD could be obtained from MPW.

Table 3.4: Distribution of the Respondents by their Knowledge about Place from where Spacing Methods can be obtained.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Per cent who know of place for IUD				
Sub-Centre/ANM	188	55.79	77	60.63
PHC	233	69.14	100	78.74
Medical Shop	60	17.80	32	25.20
MPW	13	3.86	20	15.75
Do not know the place	-	-	-	-
<i>Total number of the respondents</i>	337		127	
Per cent who know of place for Oral Pills				
Sub-Centre/ANM	221	62.78	117	65.00
PHC	229	65.06	107	59.44
Medical Shop	167	47.44	90	50.00
MPW	30	8.52	34	18.89
Do not know the place	7	1.99	-	-
<i>Total number of the respondents</i>	352		180	
Per cent who know of place for Condom				
Sub-Centre/ANM	126	51.43	119	64.32
PHC	168	68.57	108	58.38
Medical Shop	98	40.00	103	55.68
MPW	46	18.78	75	40.54
Do not know the place	11	4.49	-	-
<i>Total number of the respondents</i>	245		185	

Fig.3.4: Distribution of respondents who know of the place for IUD

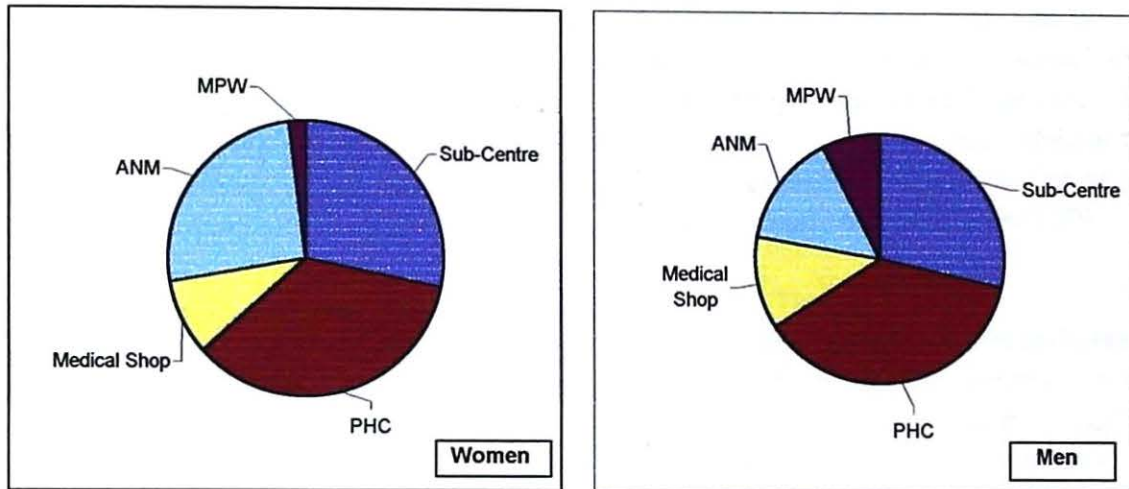


Fig. 3.5: Distribution of respondents who know of the place for Oral Pills

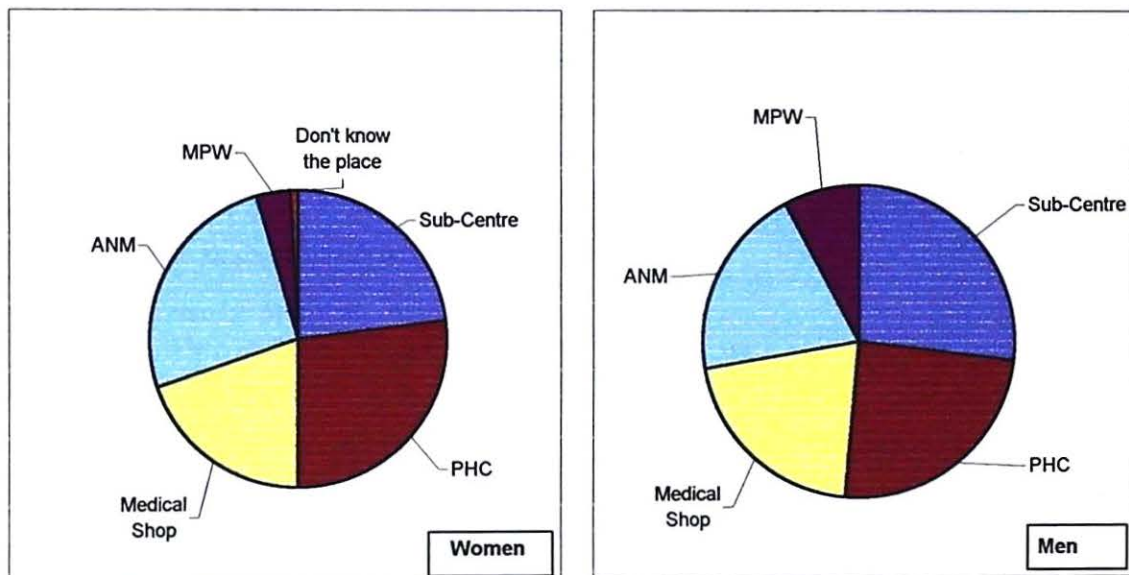
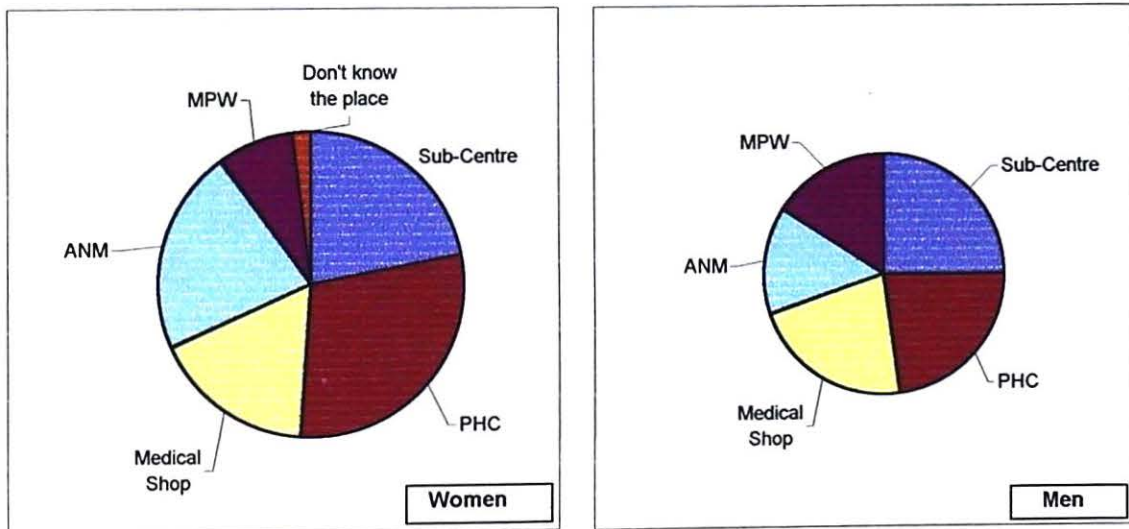


Fig. 3.6: Distribution of respondents who know of the place for Condom



With regards to the OP, it may be noted that majority of the respondents told that it could be obtained from ANM at the SC, PHC or medical shop. However, only few of the respondents told that it was available with the MPW in their area. Further, about 2 per cent of the women did not know the place where one could get OP. The proportion of women who did not know the place from where Condoms could be obtained was about 5 per cent. Like OP, majority of the respondents knew that the Condoms could be obtained from ANM at the SC, PHC, or medical shop. It was surprising to know that only about 19 per cent of the women and nearly 41 per cent of the men told that Condom was available with the MPW.

3.4 Family Planning Practices among Respondents at the Time of Survey

The information on the current methods of family planning used was also collected in the survey from both women and men respondents and the results are presented in the following tables. It may be observed from the table 3.5 that nearly 75 per cent of the eligible women and about 80 per cent of the men respondents reported using modern methods of family planning. Among the users, typically female sterilization is the most popular method as it was used by about 92 per cent of the total users whereas male sterilization was used by about 4 per cent of the users. As is the case elsewhere, spacing methods are not commonly used as about 4 to 5 per cent of the users reported using Cu-T, OP or Condom.

Table 3.5: Distribution of Women and Men by Method Use at the time of Survey.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Using Any Modern Method	321	75.35	175	79.55
Current use by methods				
Female Sterilization	295	91.90	160	91.43
Male Sterilization	13	4.05	7	4.00
IUD (Cu-T)	3	0.93	-	-
Oral Pills	8	2.49	6	3.43
Condom	2	0.62	2	1.14
Total	321	100.00	175	100.00
Duration of Use for IUD/OP/Condom				
Less than 6 months	5	NC	5	NC
6-12 months	4	NC	2	NC
More than 12 months	4	NC	1	NC
Total	13	NC	8	NC
Duration of Use for Sterilization				
Less than one year	18	5.84	-	-
1-4 years	103	33.44	64	38.82
5-10 year	105	34.09	74	4.31
More than 10 years	82	26.62	29	17.37
Total	308	100.00	167	100.00

3.5 Current use by social, economic and demographic characteristics of the users

The data in Tables 3.6 to 3.8 relates to the current use of family planning by the selected characteristics of the women and men. It may be seen from table 3.6 that the per cent of women using any modern methods of family planning goes up as the age of the women advances. For example, 4 in every 10 women aged 20-24 years were using family planning at the time of survey which rose to almost 9 in every 10 women in the ages 30 to 44 years. It may also be noted from the table that like age, per cent share of current user increases as the number of living children increases. A meager of 4 per cent of the women with no living child were using family planning whereas their share increased to about a quarter for the women with one living child and then to nearly 90 per cent for those with three or more living children. This finding also suggests that the concept of spacing between marriage and first birth does not prevail in the study population. Similarly the concept of spacing between the first and second birth is also not very popular in the study population. It is also found that the per cent of current users was more or less similar for the women irrespective of whether they had spontaneous abortion or not (75-76 per cent). However, family planning use is relatively more common among women who did not have any induced abortion and/or still birth (around 77 per cent) as compared to their counterparts.

Table 3.6: Current Use by Selected Characteristics for Women and Men Respondents.

Name of the Variable	Using Any Modern Method		Total Number of Women
	Yes	No	
Age of the Women			
Below 20 years	7.7	92.3	13
20-24 years	40.6	59.4	69
25-29 years	74.4	25.6	117
30-34 years	89.8	10.2	88
35-39 years	93.8	6.3	80
40-44 years	86.4	13.6	59
Number of living children			
No living child	4.3	95.7	23
One living child	23.7	76.3	38
Two living children	66.2	33.8	65
Three living children	87.6	12.4	161
Four or more living children	91.4	8.2	139
Had Still Birth			
Yes	57.5	42.5	40
No	77.2	22.8	386
Had Spontaneous Abortion			
Yes	77.8	22.2	27
No	75.2	24.8	399

Table 3.6 continued.....

Name of the Variable	Using Any Modern Method		Total Number of Women
	Yes	No	
Had Induced Abortion			
Yes	40.0	60.0	20
No	77.1	22.9	406
Educational Status of the woman			
None/illiterate	76.3	23.7	287
Literate	73.4	26.6	139
Exposed to:			
New Paper/Radio/TV	76.1	23.9	117
Any of four* media	76.6	23.4	47
None	74.8	25.2	262
Total	75.4	24.6	426
Age of the Men			
Below 25 years	18.2	63.6	11 ¹
25-29 years	52.6	44.7	38 ²
30-34 years	82.4	17.6	51
35-39 years	87.2	12.8	47
40 or more	95.9	4.1	73
Total	79.5	19.1	220

¹ Two men were unmarried · ² One men was unmarried ³ three men were unmarried

The data also reveals that marginally larger proportions of illiterate women as compared to the literate women were reportedly using family planning at the time of survey. It should be reminded here that majority of the women in the sample were illiterate. Exposure of the women to various types of mass media too seems to have very little impact on the current status of the women in terms of the family planning use since the share of users revolve around 75-76 per cent. The data pertaining to distribution of men by the family planning use in the last panel of the table 3.6 suggests that the family planning use is less common among younger men as compared to the older men. As may be noted about 18 per cent of the men aged 25 years were using family planning whereas in case of men 35 years or older it was 87 per cent or more.

In the table 3.7 we have given the distribution of women by the current family planning use and sex composition of the living children. It is often said the current use of family planning heavily depends on the sex composition of the living children couple had at the time of family planning acceptance. Our data too support this finding.

As may be seen, among couples with one living child, family planning acceptance is almost twice for those whose child is son as compared to the couples with daughter.

Similarly, among couples with two living children, the per cent of family planning user is substantially higher for those whose both children are sons (83 per cent) as compared the couple whose both children happened to be daughters (27 per cent). Similarly the per cent of users is almost 95 per cent among the couples with three living sons and no daughter as against of just 36 per cent among those with all three daughters and no son. It is interesting to note that among couples with three living children, though the per cent using family planning is higher for those with two sons and one daughter combination (92 per cent) as against of the one son and two daughter combination (88 per cent), the difference is marginal.

Table 3.7: Current Use by Sex Composition of the Living Children for Women Respondents.

Name of the Variable	Using any modern method		Total Number of Women
	Yes	No.	
No living child	0.00	100.0	21
One living son	28.0	72.0	25
One living daughter	14.3	85.7	14
One son and one living daughter	72.0	28.0	25
Two living sons	83.3	16.7	24
Two living daughters	26.7	73.3	15
Two sons and one living daughter	91.8	8.2	98
Two daughters and one living son	87.5	12.5	40
Three or more daughters & no son	36.4	63.6	11
Three or more sons & no daughter	94.7	5.3	19
Any other combination	91.8	8.2	134

3.6 Current non use and Reasons for non use

All the current non-users were asked if they had used any of the modern method(s) anytime in the past and also about the most important reason for not using any method. The result on this are presented in the table 3.8. It may be noted from the table that out of the total 105

women who were not using any modern method at the time of survey, over 92 per cent did not use any of the modern method in the past as well. Among users, five had used Pills and 3 Condom. In case of men, 36 of the 42 current non-users did not use any method while one reported using condom, 2 IUD and 3 Pills. When asked about the most important reason for not using any method, over half of the women and about 11 per cent of the men respondents replied that they wish to have another child and hence were not using any family planning. Some of the other reasons given were; 'spouse/other family members against family planning', 'do not like any method' and 'in menopause/PPA'.

Table 3.8: Current Non-User, Use of Family Planning in Past three Years Prior to Survey.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Used IUD	-	-	2	4.76
Used OP	5	4.76	3	7.14
Used Condom	3	2.86	1	2.38
Not Used any modern methods	97	92.38	36	85.71
Reason for Current Non-Use				
Want more children	54	51.43	4	11.11
Spouse/Others against family planning	10	9.52	-	-
Do not like existing method	9	8.57	1	2.78
In PPA/Menopause	28	26.67	31	86.11
Do not know method	4	3.81	-	-
Total	105	100.00	42	100.00

3.7 Preference of men for family planning methods

In the present survey we also asked the men respondents about the preferred method of family planning and the results are given in the first panel of the Table 3.9. It may be noted from the table that out of the 220 men interviewed in the present survey, except for 29 men who said that they would prefer to use male methods of family planning (vasectomy and condom), remaining men said that they prefer female methods of family planning (majority preferring female sterilization - 75 per cent). When asked about the reason for choosing female method, 'Fear of Weakness' followed by 'Fear of Impotency' emerged as the important reasons given by majority of the men. Further about 20 per cent of the men thought that they would have lesser sexual pleasure if they used a male method. Another about 20 per cent of the men told they were scared of operation and hence do not prefer vasectomy.

Table 3.9: Preference of Men for Family Planning methods.

Name of the Variable	Number	Percent
Preferred family planning method		
Female sterilization'	165	75.00
Male sterilization	13	5.91
IUD	6	2.73
Oral Pill	13	5.91
Condom	16	7.27
Combination of various female methods	7	3.18
Total	220	100.00
Reasons for not preferring male methods		
Fear of Impotency	98	51.31
Fear of weakness	153	80.10
Lack of sexual pleasure	34	17.80
Fear of method failure	25	13.09
Fear of operation	38	19.90
Cannot say	3	1.57
Total	191	NA

Fig. 3.7 : Distribtuion of current users of family planning by method

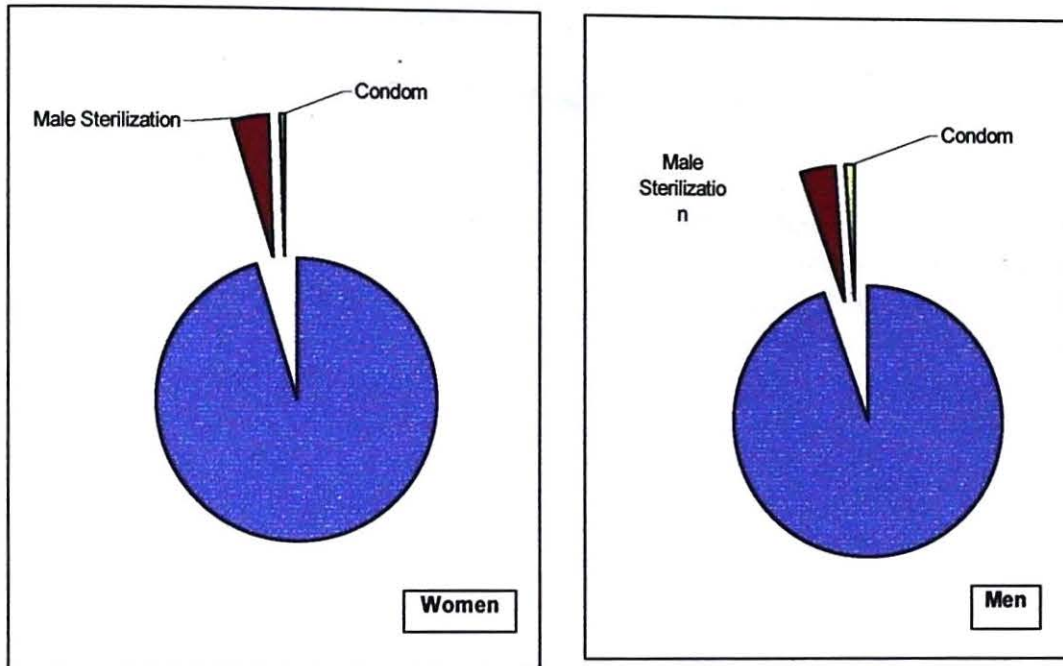
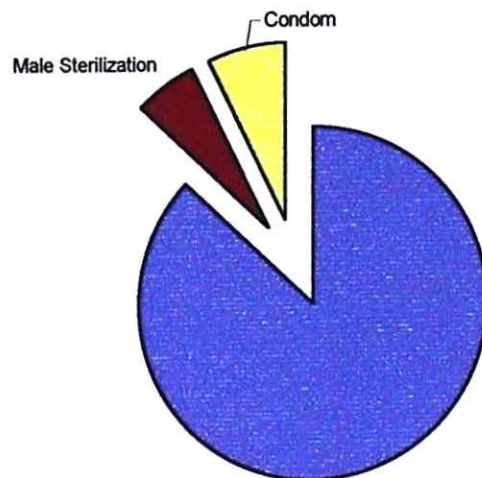


Fig. 3.8 : Distribtuion of men by preferred method of family planning



Chapter 4

Knowledge of RTI/STI and HIV (AIDS)

In the present chapter we analyze the knowledge level of the respondents about RTI/STI and HIV (AIDS) including sources of information and knowledge and misconception about their spread etc.

4.1 Knowledge of RTI, STI and HIV (AIDS)

It may be noted from Table 4.1 that out of the total 477 women respondents only about a quarter knew about the RTI. Further, the knowledge of STI was even poorer as only one in six of the women respondents knew about it. Contrary to this, relatively more women knew about AIDS (39 per cent). The data reveals that comparatively more men respondents than the women knew about STI and HIV (AIDS); about 35 and 71 per cent of the men respondents respectively knew about STI and HIV (AIDS). With regard to the understanding of the respondents about the curability status of these diseases it may be noted from the second panel of the same table that majority of the men and women respondents believed that the RTIs and STIs were curable. On the other hand, only about 9 and 4 per cent of the women and men respondents respectively reported that the HIV (AIDS) was curable.

Table 4.1: Per cent of Respondents who have Knowledge of RTI/STI/HIV (AIDS).

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Per cent who know				
RTI	116	24.79	45	20.45
STI	78	16.67	77	35.00
HIV(AIDS)	181	38.68	156	70.91
Total	477		220	
Per cent who think that it is curable				
RTI	91	78.45	38	84.44
STI	66	84.62	64	83.12
HIV(AIDS)	16	8.84	7	4.49
Advice given at the Camp				
Yes	173	37.53	21	58.33
No	288	62.47	15	41.67
Total	461	100.00	36	100.00

It is hard to believe that the knowledge level of the respondents could be so poor, particularly that of the women. It may be reminded here that out of the 477 woman respondents, 470 have attended Family Health Awareness Campaign organized in their area and have been clinically tested positive for RTI/STI and in case of men out of the 220, 36 have attended the Camp and 29 have been tested positive for RTI/STI. Despite this, very few knew about RTI/STI. This may implicate poor counseling during the camps. Our data too support it. As may be noted from the last panel of the same table that out of the total 461 women who attended the camp and were clinically tested positive for RTI/STI, only about 38 per cent were advised on various aspects related to the diseases. The per cent of men, though based on relatively smaller sample, who were advised was about 58 per cent.

4.1.1 Knowledge of RTI, STI and HIV (AIDS) by the selected social, economic and demographic characteristics of the respondent

In the Table 4.2 we have given per cent of men and women who knew about RTI, STI and HIV (AIDS) by the selected social, economic and demographic characteristics. It may be observed that relatively higher per cent of younger women and men were aware of RTI and HIV as compared to the older ones. It may further be noted that the per cent of women who were aware of STI was more or less similar across various age groups whereas in case of men relatively larger proportions of younger men as compared to their older counterparts knew about the disease.

Table 4.2: Per cent knowing RTI/STI/HIV (AIDS) by the selected social, economic and demographic characteristics.

Name of the Variable	Percent Women knowing			Percent Men knowing		
	RTI	STI	HIV	RTI	STI	HIV
Present Age of Respondent						
Below 20 years	15.8	10.5	63.2	-	-	-
20-24 years	31.6	16.5	41.8	22.2	54.5	81.8
25-29 years	27.0	18.3	51.6	24.3	55.3	78.9
30-34 years	28.3	13.0	42.4	23.5	35.3	80.4
35-39 years	19.0	19.0	26.2	23.9	38.3	83.0
40 years or more	17.6	17.6	14.7	15.5	19.2	50.7
Present Marital Status						
Currently Married	25.4	16.4	38.9	21.0	34.6	70.5
Widow/Divorce/Separated	25.0	16.7	25.0	-	-	-
Never Married	0.0	27.3	45.5	0.0	66.7	100.0
Years of School¹ Completed						
No Schooling (Illiterate)	19.0	12.6	22.6	5.2	11.7	46.7
1-4 years	26.1	15.2	50.0	18.0	17.6	58.8
5-7 years	36.1	19.7	70.5	26.2	38.2	81.0
8 or more years	45.1	39.2	88.2	34.4	67.2	95.5

Table 4.2 continued.....

Name of the Variable	Percent Women knowing			Percent Men knowing		
	RTI	STI	HIV	RTI	STI	HIV
Occupation						
Housewife/House Husband	32.0	30.7	66.7	-	-	-
Works on Own Land	20.0	11.5	36.0	17.9	37.0	73.0
Works on Other's Land	26.1	14.8	26.7	12.1	16.4	61.2
Self employed*	35.3	35.3	70.6	37.7	54.7	79.2
Exposure to Mass Media						
Exposed to any of 4 media	32.6	28.0	57.6	22.7	33.3	78.9
Exposed to NP/Radio/TV	41.2	33.3	88.2	46.0	76.9	98.1
Not exposed to any of 4	18.2	8.4	21.1	2.6	9.0	43.6
Total	24.8	16.7	38.7	21.0	35.0	70.9

As one would expect, educational status of the respondent and their exposure to various types of mass media seem to emerge as important factor influencing their awareness level when it comes the knowledge on these diseases. It may be seen that the per cent of women and men who knew these diseases increased substantially with an increase in the years of schooling completed by the respondent. For example, per cent of men and women knowing RTI, STI and HIV ranged between 34 to 96 per cent among those who had completed 8 or more years of schooling as against of 5 to 47 per cent for illiterates. Similarly, per cent of men and women knowing these diseases varied between 23 to 79 per cent among those who were exposed to any of the 4 media as compared to 3 to 44 per cent for those not exposed to any. Thus, the educational level and the exposure of the respondents to various types of mass media clearly seem to impact on the knowledge level of the respondents on these diseases.

4.2 Source of Information on RTI, STI and HIV (AIDS)

Table 4.3 gives relevant data on the sources from where the respondents received information on these diseases. As the data reveals, the health workers and relatives and friends are the two most important sources from whom men and women learnt about RTI and STI; over two-thirds of the women learnt about RTI and STI from health workers and/or relatives/friends. In case of men, almost 80 per cent learnt about these diseases from the relatives/friends whereas nearly 56 per cent and 62 per cent learnt about RTI and STI respectively from the health worker. On the other hand, other types of media, whether it is print media, electronic media, community meetings, school teachers or doctors, had played rather limited role when it comes to the spread of the knowledge of the people on the issues like RTI and STI, particularly for the women respondents. In case of men about 35 to 40 per cent of the respondents did say that they learnt about RTI and STI from doctor and/or print media. However, their role too seems to be very little. In other words it appears that the television seem to have played crucial role in spreading the

Fig. 4.1 : Distribution of respondent by Knowledge of RTI, STI and HIV(AIDS)

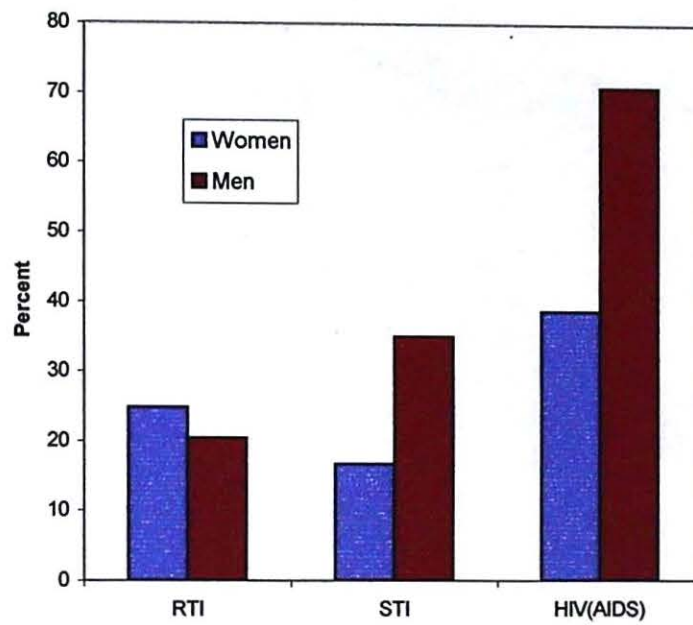
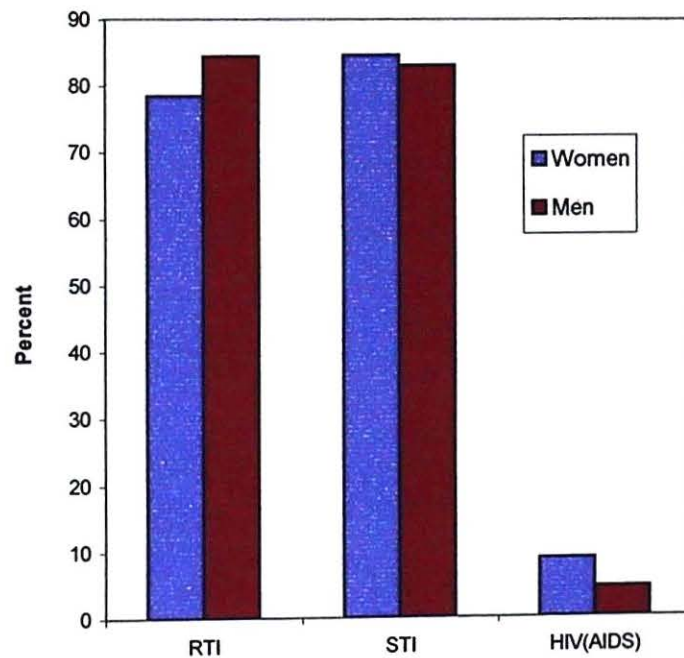


Fig. 4.2 : Distribution of respondents who think that the RTI,STI and HIV can be cured



knowledge of HIV (AIDS), indicating that the AIDS campaign have effectively used television as a medium of communicating the messages.

Table 4.3: Source of Information of RTI/STI/HIV (AIDS).

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
RTI				
Health worker	82	70.69	25	55.56
Doctor	2	1.72	20	44.44
Print media	31	26.72	23	51.11
Radio	8	6.90	6	13.33
Television	21	18.10	17	37.78
Relatives/Friends	82	70.69	39	86.77
Community meetings	25	21.55	3	6.67
School teachers	5	4.31	1	2.22
<i>Total</i>	<i>116</i>		<i>45</i>	
STI				
Health worker	51	65.38	48	62.34
Doctor	11	14.10	27	35.06
Print media	9	11.53	36	46.75
Radio	4	5.13	5	6.49
Television	20	25.64	18	23.38
Relatives/Friends	56	71.79	62	80.52
Community meetings	10	12.82	16	20.78
School teachers	3	3.85	2	2.60
<i>Total</i>	<i>78</i>		<i>77</i>	
HIV(AIDS)				
Health worker	84	46.41	72	46.15
Doctor	24	13.26	49	31.41
Print media	49	27.07	82	52.57
Radio	24	13.26	24	15.38
Television	98	54.14	79	50.64
Relatives/Friends	130	71.82	124	79.49
Community meetings	26	14.36	31	19.87
School teachers	6	3.31	10	6.41
<i>Total</i>	<i>181</i>		<i>156</i>	

Coming to the source of information on the killer disease of HIV (AIDS), it may be observed from the last panel of the same table that majority of the respondents learnt about it from the relatives and/or friends (72 and 79 per cent of women and men respectively). Nevertheless, a little over half of the respondents reportedly learnt about the killer disease from television and print media (only in case of men). Health worker was reported as source of information on HIV (AIDS) by about 46 per cent of the respondents.

Fig. 4.3 : Distribution of respondents according to source of information on RTI

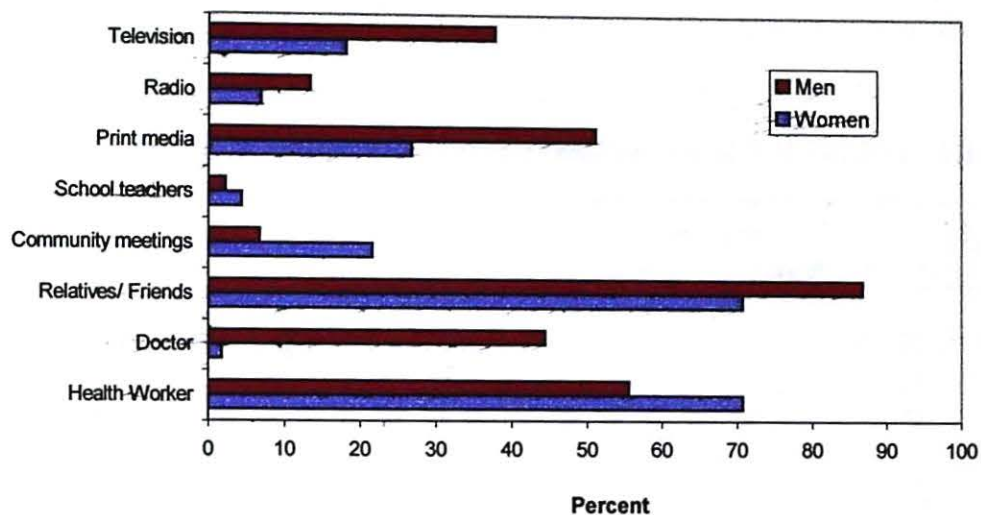


Fig. 4.4: Distribution of respondents according to source of information on STI

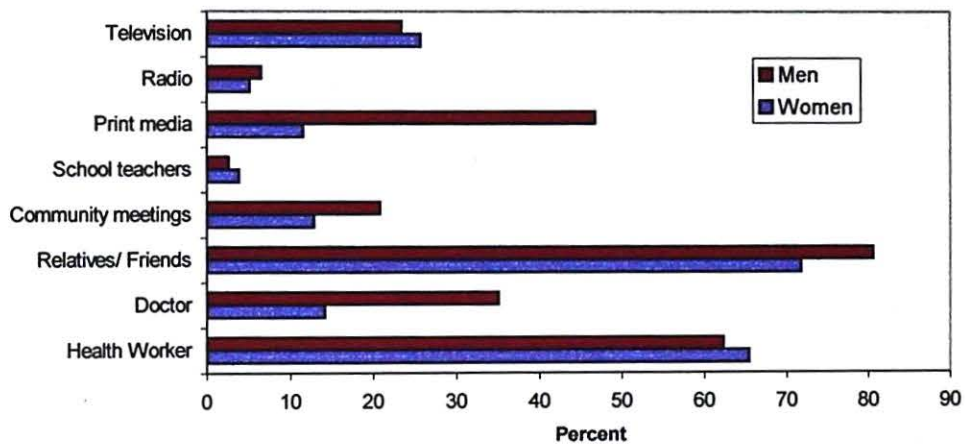
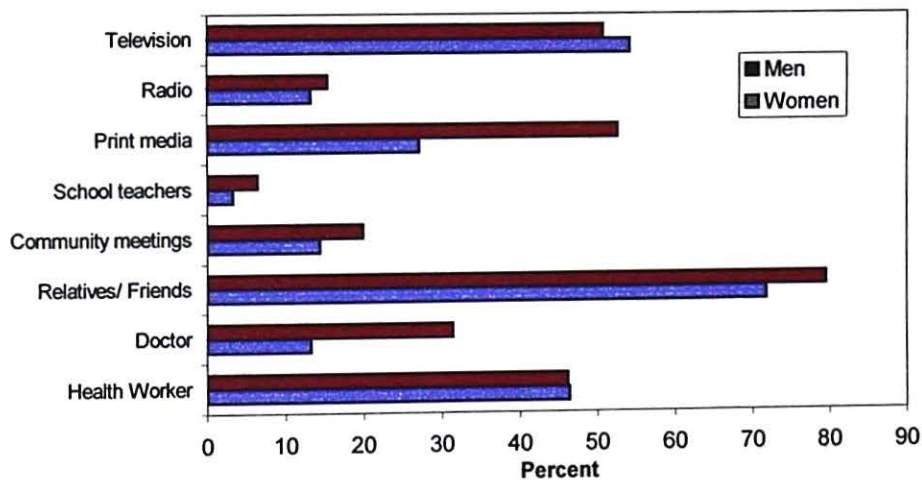


Fig. 4.5: Distribution of respondents according to source of information on HIV(AIDS)



In the present survey we have also collected information from both men and women regarding their knowledge on the mode of transmission of these diseases and people's misconception about their transmission. The data is presented in the Tables 4.4 and 4.5 respectively.

Table 4.4: Knowledge on Mode of Transmission/Spread of RTI/STI/HIV (AIDS).

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
RTI				
Homosexual intercourse	13	11.21	10	22.22
Heterosexual intercourse	29	25.00	22	48.89
Lack of personal hygiene	50	43.10	25	55.56
Do not know	37	31.90	3	6.67
<i>Total</i>	<i>116</i>		<i>45</i>	
STI				
Homosexual intercourse	9	11.54	15	19.48
Heterosexual intercourse	28	35.90	57	74.03
Mother to child	17	21.79	9	11.69
Transfusion of infected blood	19	24.36	24	31.17
Do not know	21	26.92	6	7.79
<i>Total</i>	<i>78</i>		<i>77</i>	
HIV(AIDS)				
Homosexual intercourse	33	18.23	35	22.44
Heterosexual intercourse	85	46.96	131	83.97
Use infected needles/blades/skin puncture	52	28.73	88	56.41
Mother to child	42	23.20	51	32.69
Transfusion of infected blood	90	49.72	102	65.38
Other	3	1.66	1	0.64
Do not know	45	24.86	3	1.92
Per cent know HIV(AIDS) prevention				
Sex with single partner	87	48.07	120	76.92
Use condom during intercourse	58	32.04	90	57.69
Check blood prior to transfusion	84	46.41	95	60.90
Use sterilized needles/syringes	56	30.94	86	55.13
Avoid pregnancy when HIV positive	13	7.18	29	18.59
Do not know	42	23.20	1	0.64
<i>Total</i>	<i>181</i>		<i>156</i>	

It may be seen from the Table 4.4 that the knowledge of the respondents about the mode of transmission of these diseases too is very poor. About 32, 27 and 25 per cent of the women respondents did not know about the mode of transmission of RTI, STI and HIV (AIDS) respectively. Only about 11 and 22 per cent of the women and men respectively told that one may get RTI during homosexual intercourse. Further, about a quarter of the women and little less than half of the men respondents told that one could

get RTI during heterosexual intercourse. Lack of personal hygiene was reported as the source of transmission of RTI by about 43 and 56 per cent of the women and men respectively. Further, nearly one-third of the women and about 7 per cent of the men did not have any information on how one could get the RTI.

With regards to the spread of STI too, the awareness levels of the respondents, once again, were very poor. For example, over one-fourth of the women and 8 per cent of the men respondents did not know about the spread of STI. Further, relatively higher per cent of the men respondents as compared to the women told that one could get STI through heterosexual intercourse (74 per cent as against of 36 per cent) and homosexual intercourse (19 per cent as against of 12 per cent).

As was the case with knowledge, relatively more men and women respondents were aware of the modes of the HIV (AIDS) transmission. Nevertheless, there were about one-fourth of the women and 2 per cent of the men who did not know about the mode of transmission of the killer disease. The data indicates that a little less than half of the women knew that one could acquire HIV (AIDS) through transfusion of infected blood and/or heterosexual intercourse. A rather lower per cent of the women respondents (ranging between 18 to 28 per cent) knew that one could get the killer disease during homosexual intercourse or by using infected needles/blades/skin puncture or it could be transmitted to the child from mother. In case of the men, about 84 per cent and 65 per cent respectively reported that HIV (AIDS) could be transmitted during heterosexual intercourse and/or through transfusion of infected blood. Further, nearly 56 and 33 per cent of the men respectively reported that the killer disease could be transmitted through use of infected needles/blades/skin puncture and/or from infected mother to her child. Another about 22 per cent of the men told that one could acquire HIV (AIDS) during homosexual intercourse.

In response to the question on how one can protect himself/herself from acquiring deadly HIV (AIDS), it may be noted from the last panel of the Table 4.4 that the knowledge of women on this aspects too seem to be very poor, as over 23 per cent of the women respondent did not have any knowledge on this. Nonetheless, less than half of the women reported that one could avoid HIV (AIDS) by restricting to single partner sex and/or checking the blood before transfusion. Nearly 30 to 32 per cent of the women told that one could protect oneself against the disease by using condom during sex and/or using sterilized needles/syringes. 'Avoid pregnancy when infected with HIV (AIDS)' was reported as means of protection from getting the disease by only about 7 per cent of the women.

The data also reveal that men were relatively better off in this matter as compared to the women since more men than women were aware of different ways in which one could protect oneself from acquiring the deadly disease. For example, nearly 77 and 58 per cent of men respectively told that they could avoid it by ensuring sex with single partner and/or using condom during intercourse. Checking blood before transfusion and/or using sterilized needles/syringes was reported by about 61 and 55 per cent of the

men respectively. However, only about 19 per cent of the men were aware that the pregnancy should be avoided when infected with HIV.

In the Table 4.5 we have summarized the results on the misconception among men and women about the spread of the killer disease. At the outset it seems that though the misconceptions about the spread of the disease at overall levels are relatively lower, they typically are more common among women than men. It may be observed that about 20 to 22 of the women thought that one could get HIV by kissing and/or stepping on the urine/stool of the HIV infected person. Further, nearly 13 to 18 per cent of the women reported that HIV could be acquired if one shares the utensils/clothes with HIV positive person and/or hugs a person who is infected with the disease. Nearly 10 per cent of the women believed that HIV could be spread by shaking hands with the infected person. The corresponding figures for men ranged from less than one per cent for 'shaking hands' to about 12 per cent for 'stepping on urine/stool of the infected person'.

Table 4.5: Misconception about Spread of RTI/STI/HIV (AIDS).

Per cent who think one can get HIV(AIDS) by:	Women		Men	
	Number	Percent	Number	Percent
Shaking hands with HIV positive	19	10.50	1	0.64
Hugging HIV positive person	24	13.26	4	2.56
Kissing HIV positive person	40	22.10	15	9.62
Sharing clothes with HIV positive person	25	13.81	9	5.77
Sharing utensil with HIV positive person	32	17.68	14	8.97
Stepping on stool/urine of HIV positive person	37	20.44	18	11.54
Mosquito/flea/bedbug bite	27	14.92	14	8.97

Chapter 5

Prevalence of RTI/STI in the past and at the time of survey

In the present chapter we discuss the results on the prevalence of RTI/STI among the respondents during anytime in the past and at the time of survey. We further discuss the findings on the health-seeking behavior, place of treatment, cost of treatment etc. and how it has influenced their lives

5.1 RTI/STI prevalence before the Camp

5.1.1 Prevalence of RTI/STI

The data in Table 5.1 indicates that out of the total 477 women interviewed in the present study, about 90 per cent also suffered from one of the RTI in the past before the camp. White discharge seems to be the most common disorder as 8 in every 10 women had suffered from it while about 40 per cent of them suffered from either 'burning sensation while urinating' and/or 'pain in the lower abdominal/vagina during intercourse'.

It is further observed that among those women, who suffered from the white discharge, about 29 per cent had thick curdy, white, smelling discharge whereas another 18 per cent had thin white foul smelling discharge. There were 3 per cent of the women who told that they suffered from thick gray white foul smelling discharge. For the remaining women, the discharge was occasional, very little and non-smelling. Further, though majority of these women (about 73 per cent) did not have either itching or burning with the discharge, there were 18 per cent of them who reportedly suffered from the itching with the discharge and another 5 per cent from burning. A little over half of the women reported that with the discharge they also had pain in the lower abdominal whereas about a quarter had fever.

The data in the Panel B of the same table reveals that on the whole about 10 per cent of the men suffered from one or more of the RTIs included here in the past prior to the camp. 'Difficulty/pain while urinating' was the most common disorder reported by the men (7 per cent) interviewed in the present study. Another about 3 per cent reported of the men reported that they had 'discharge from the penis' while another less than a percent suffered from 'sore on genital or anal area'. About half of the men reported that their Syphilis test carried out in the past was positive.

One thing that comes out clear from the data in this table, is that per cent of men who reporting that they suffered from RTI in the past was much lower as compared to the women. This raises a question - is RTI prevalence among men really lower? We feel that it may not be true. The lower levels of RTI reported by the men could be due to the fact that men do not easily report about RTI. During the course of our fieldwork we found that

the men respondents were rather reluctant to answer to these questions and the investigators have to do lot of counseling to get the responses from them.

Table 5.1: Women and Men suffered from RTI/STI anytime in the past before camp.

	Number	Percent
A: Women suffering in the past (N=477)		
Burning sensation while urinating	89	40.38
Pain in lower abdominal/vagina during intercourse	177	37.82
Problem of white discharge	371	79.27
Suffered from at least one of the above three	420	89.74
Nature of discharge (N=371)		
Very little mucoid non-foul smelling occasionally	207	49.29
Thick curdy white	134	29.52
Thin dirty white foul smelling	75	17.86
Thick gray white foul smelling	14	3.33
With discharge get (N=371)		
Itching	77	18.33
Burning	21	5.00
Both itching and burning	16	3.81
None of the above	306	72.86
Lower abdominal pain	214	50.95
Fever	109	25.95
B: Men suffering in the past (N=220)		
Discharge from Penis	6	2.73
Sore on genital or anal area	2	0.91
Positive Syphilis blood test	1	0.45
Difficulty/pain while urinating	16	7.27
Swelling of testes	2	0.91
Suffered from at least one of the above three	22	10.00

5.1.2 Treatment seeking behavior

Table 5.2 gives data on the treatment-seeking behavior of the women and men along with the data on place of treatment etc. It may be noted that almost 90 per cent of the women and over two-thirds of the men who suffered from one or more RTI in the past took treatment for the same, often went to more than one place seeking treatment. Over three-fourth of the women went to the government doctor whereas little less than a quarter went to the private doctor. Another about 19 per cent of the women took treatment

Fig. 5.1 : Distribution of women suffering from RTI/STI in the past

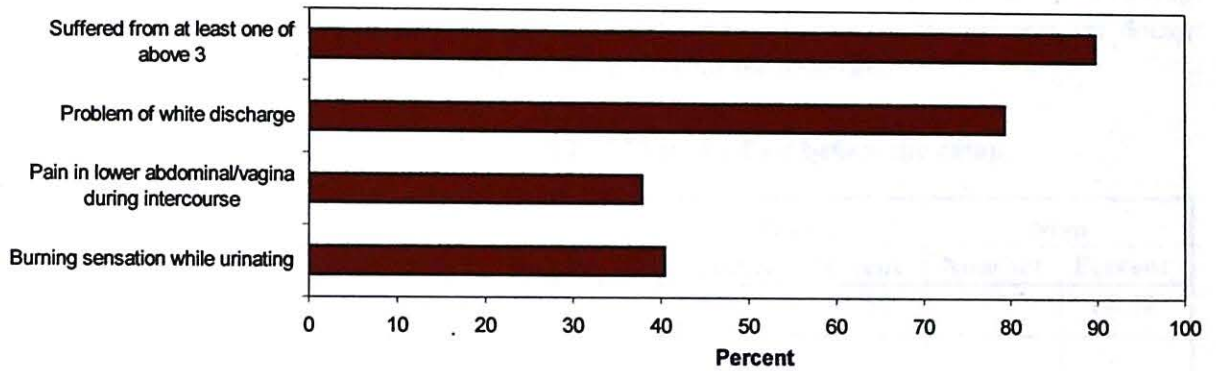


Fig. 5.2: Distribution of women according to nature of discharge

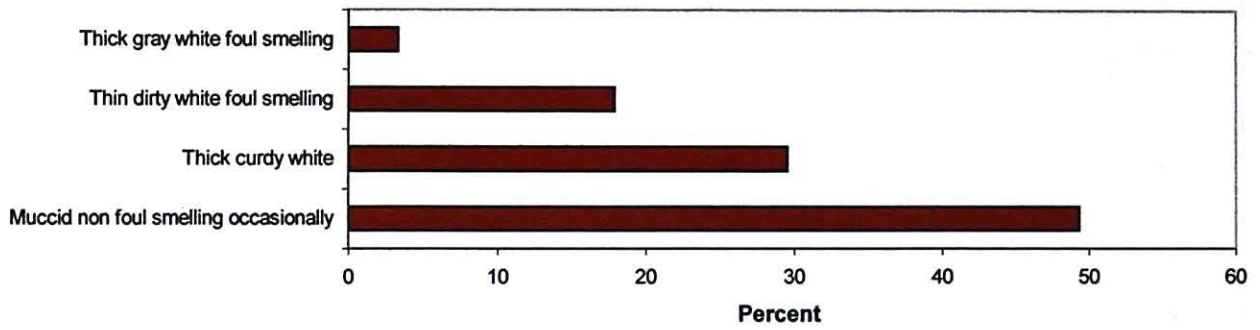


Fig. 5.3: Distribution of women by burning and itching with discharge and lower abdominal pain

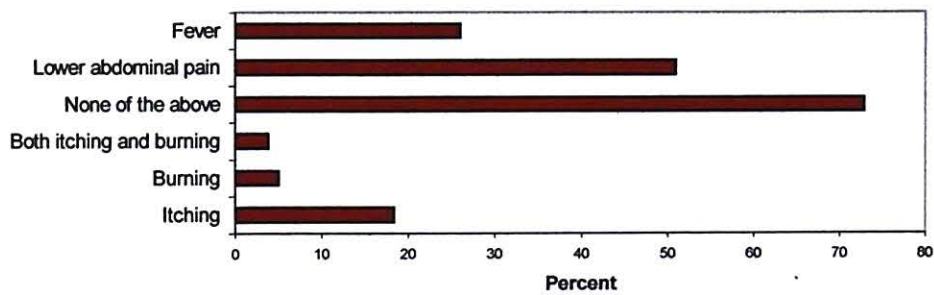
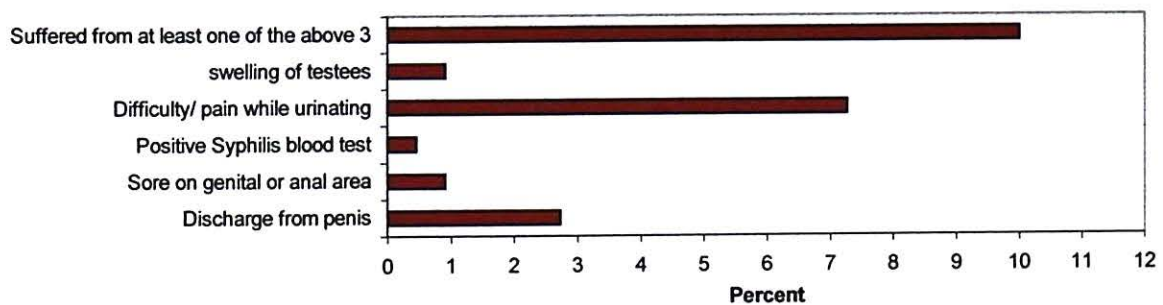


Fig. 5.4 : Distribution of men who were suffering from RTI /STI in the past



from the nurse. There were few women who had gone to the traditional practitioners for the treatment and/or directly got medicines from the medical shop/pharmacist. In case of men, it may be observed that of the total 15 men, 10 went to the government doctor whereas remaining 5 went to the private doctor for the treatment.

Table 5.2: Sought Treatment for RTI/STI in the Past before the camp.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Per cent who took treatment	372	88.57	15	68.18
Place of Treatment (multiple)				
Govt. doctor	284	76.34	10	NC
ANM/LHV	70	18.82	-	-
Private doctor	85	22.85	5	NC
Medical shop/ Pharmacist	3	0.81	-	-
Traditional Practitioners	5	1.35	-	-
Who decided about the treatment				
Spouse	243	65.32	2	NC
Self	124	33.3	13	NC
Parent	4	1.08	-	NC
All family members jointly	1	0.27	-	NC
Result of the treatment				
Disease cured	287	77.15	10	NC
Disease not cured	85	22.85	5	NC
Money spent on treatment (in Rs.)				
Free/no money spent	267	71.77	9	NC
Up to 200	28	7.53	4	NC
201 to 500	28	7.53	2	NC
More than 500	49	13.17	-	NC
Total	372	100.00	15	NC

NC = Not Calculated due to smaller number.

When it comes to the decision making status with regards to the treatment the finding of our survey do confirm the expected pattern, in most cases husband taking the decision on to whether women should take treatment or not. Women themselves have very little say when it comes to these issues. As may be seen from the data in the second panel of the above table, in almost two-thirds of the cases it was husband who decided that the woman takes treatment for her sickness. On the other hand, only about a third of the women decided on their own about taking the treatment. Contrary to this, out of the 15 cases of men, in 13 cases they themselves decided about the treatment. Further, in about 77 per cent of the cases women and two-third of the cases in men, the disease was cured after the treatment. With regards to the expenses incurred in the treatment it appears

Fig 5.5 Distribution of women who took the medical treatment

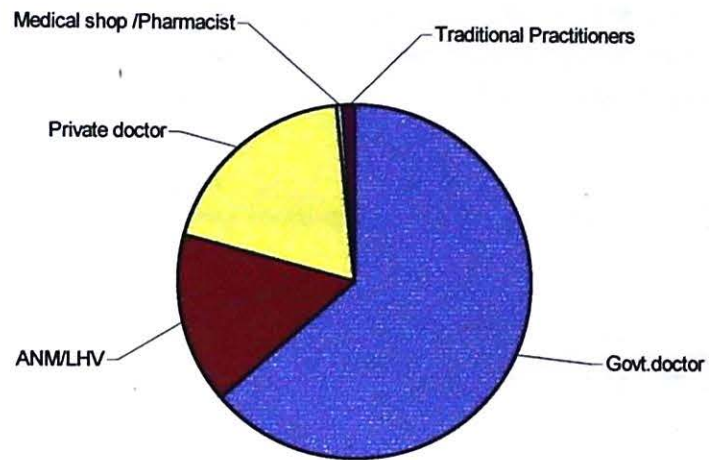
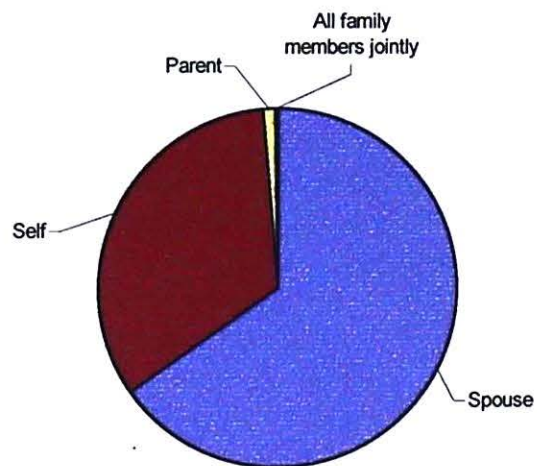


Fig. 5.6 : Distribution of Women by the person taking decision for treatment.



that most of them had not spent any money on it. Nevertheless, about 13 per cent of the women did spend more than 500 rupees in treatment.

All of the women and men who did not take any treatment for the disease were asked about the most important reason for not taking the treating. The responses obtained on this are presented in Table 6.3. 'Feels ashamed' followed by 'Unaware of the place of treatment' were the most important reasons given by the women for not treating the disease (48 and 35 per cent respectively). The other reasons reported by the women were: 'Financial reasons' and 'No time'. The reasons for not taking the treatment by the men too were more or less similar.

Table 5.3: Reasons for not taking treating RTI/STI in the Past.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Feels ashamed/shy	23	47.92	3	NC
Unaware of the place of treatment	17	35.42	2	NC
Financial reasons	4	8.33	1	NC
No time	4	8.33	1	NC
Total	48	100.00	7	NC

5.2 Prevalence of RTI/STI at the Time of Survey

5.2.1 Prevalence of RTI/STI

In the following tables we have given data on the prevalence of RTI/STI among the women and men at the time of survey along with the treatment-seeking behavior. It may be seen from the Table 5.4 that out of the total 477 women, 128 (27.35 per cent) were suffering from one or more RTI/STI at the time of survey. Further, about a quarter of the women reportedly suffered from white discharge while another 10 per cent each suffered from the burning sensation during urination and pain in the lower abdominal during intercourse. It was further noted that of the 128 women who suffered from RTI/STI, about 30 per cent were suffering from it for over two years whereas another about 45 per cent of the women were suffering for a year or less.

With regards to the severity of the disease, data reveals that slightly more than half of the women told that get very little mucoid non-foul smelling fluid with discharge occasionally. Another about a quarter of the women told that with discharge they also get thick curdy white fluid. It is further noted that about 18 per cent of the women suffered from thin dirty white foul smelling fluid. Though about 73 per cent of the women did not suffer from either itching or burning, nearly 20 per cent of the women reportedly were suffering from itching with discharge whereas another about 5 per cent from burning. Over 45 per cent and 29 per cent of the women respectively reported that they got pain in

the lower abdominal and fever with the discharge. In case of men, 8 reported that they were suffering from discharge from penis and/or difficulty/pain while urinating.

Table 5.4: Women and Men suffered from RTI/STI at the time of survey.

	Number	Percent
A: Women suffering in the past (N=468)		
Burning sensation while urinating	49	10.47
Pain in lower abdominal/vagina during intercourse	49	10.47
Problem of white discharge	119	25.43
Suffered from at least one of the above three	128	27.35
Nature of discharge (N=120)		
Very little mucoid non-foul smelling occasionally	69	53.91
Thick curdy white	30	23.44
Thin dirty white foul smelling	23	17.97
Thick gray white foul smelling	6	4.69
With discharge get (N=120)		
Itching	25	19.53
Burning	7	5.47
Both itching and burning	3	2.34
None of the above	93	72.66
Lower abdominal pain	58	45.31
Fever	37	28.91
B: Men suffering in the past (N=220)		
Discharge from Penis	3	NC
Sore on genital or anal area	-	-
Positive Syphilis blood test	-	-
Difficulty/pain while urinating	6	NC
Swelling of testees	-	-
Suffered from at least one of the above three	8	3.64

NC = Not Calculated due to smaller number.

In the Table 5.5 we have given data on the treatment-seeking behavior of the respondents. It may be noted from the data that out of the 128 women were suffering from RTI/STI at the time of survey, nearly 88 per cent had sought treatment for the disease. Further among those who sought treatment, nearly two-thirds have gone to the government doctor while another about 30 per cent or so had gone to the private doctor. It may also be noted that nearly 29 per cent of the women took treatment from the ANM. It should be mentioned here that in many cases women had taken treatment from more than one source. With respect to the decision on treatment, in about two-third cases it was

Fig. 5.7 : Distribution of women suffering from RTI/STI at the time of survey

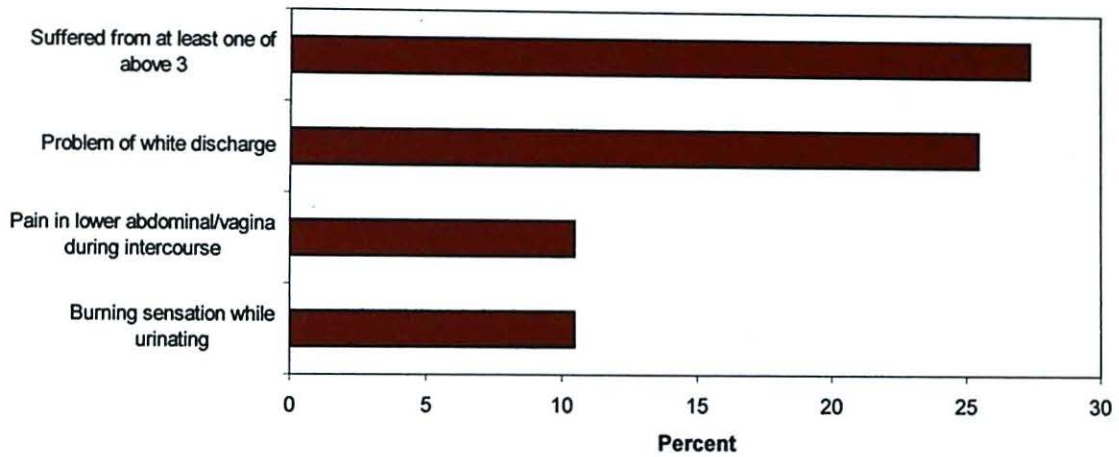


Fig. 5.8 : Distribution of women according to nature of discharge at the time of survey

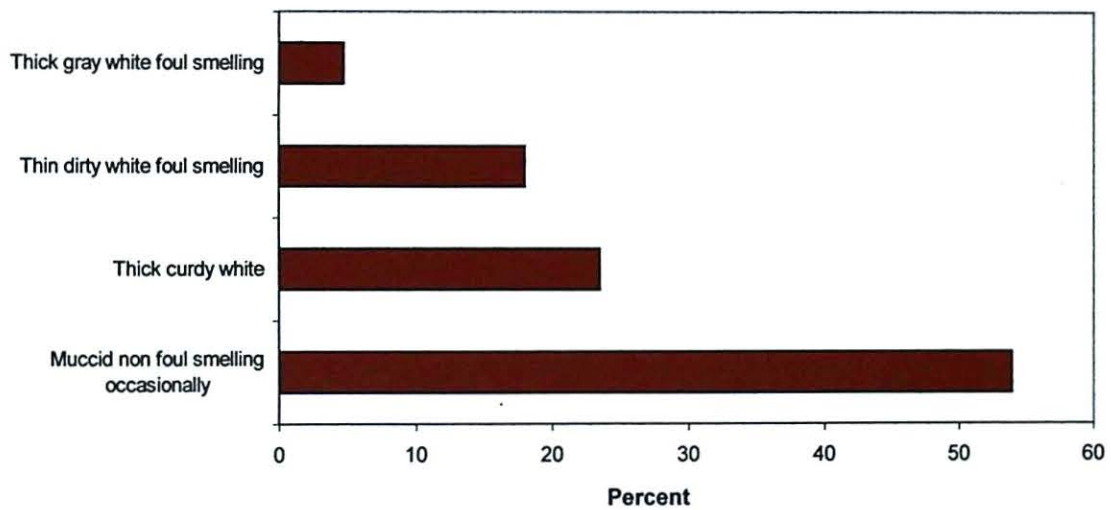
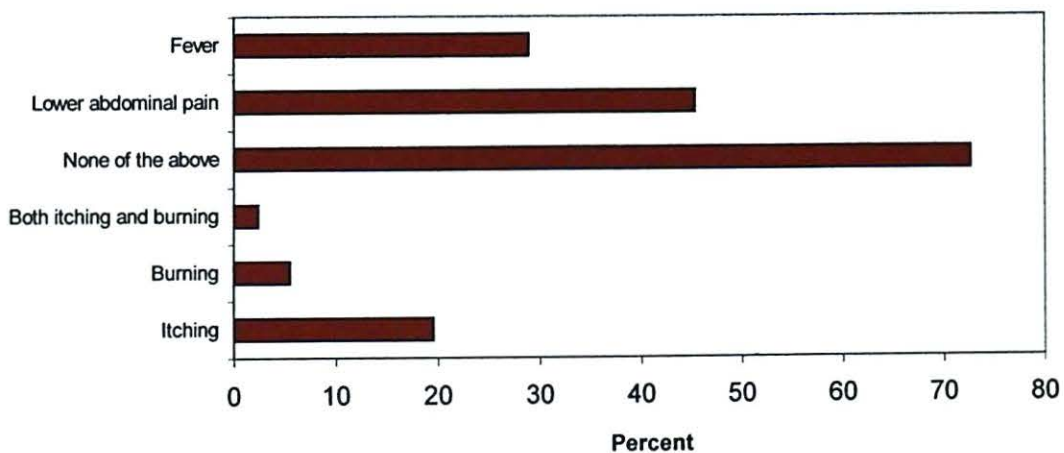


Fig. 5.9 : Distribution of Women by burning and itching with discharge and lower abdominal pain



husband who decided that the women go for treatment. Nevertheless, there were about 30 per cent of the women who decided on their own. Further, it is important to note that about 54 per cent of women were satisfied with the treatment whereas remaining 46 per cent were not satisfied with the treatment given to them. It is surprising to note that about 29 per cent of the women stopped treatment without cure. Once again, majority of the women did not incur any expenses in the treatment. However, there were about 9 women who reportedly spent one thousand or more on the treatment till the survey date.

Table 5.5: Sought Treatment for RTI/STL

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Per cent who took treatment	112	87.50	3	NC
Place of Treatment (multiple)				
Govt. doctor	73	65.18	1	NC
ANM/LHV	32	28.57	-	-
Health Camp	-	-	-	-
Private doctor	34	30.36	2	NC
Medical shop/ Pharmacist	-	-	-	-
Traditional Practitioners	1	0.89	-	-
Who decided about the treatment				
Spouse	75	66.96		
Self	34	30.36		
Parent	2	1.79		
All family members jointly	1	0.89		
Satisfied with the treatment	61	54.46	1	NC
Status of disease at the time of survey				
Cured	18	16.07		
Continuing the treatment	62	55.36		
Discontinued treatment without cure	32	28.57		
Total Money spent on treatment (in Rs.)				
Free/ No money spent	67	59.82		
Up to 500	22	19.64		
501 to 1000	14	12.50		
More than 1000	9	8.08		
Total	120	100.00		

NC = Not Calculated due to smaller number.

When asked about the reason for not seeking treatment, 'financial reasons' followed by 'no time' were the important reasons given by the women for not treating the disease (see Table 5.6).

Fig. 5.10 : Distribution of women who took the medical treatment

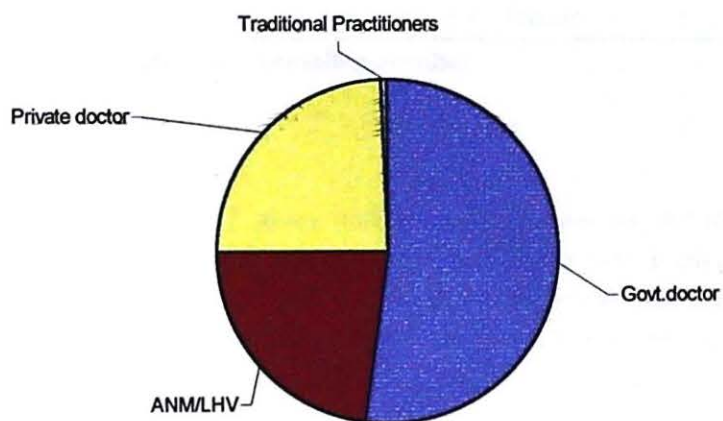


Fig. 5.11 : Distribution of women by who decided for the treatment

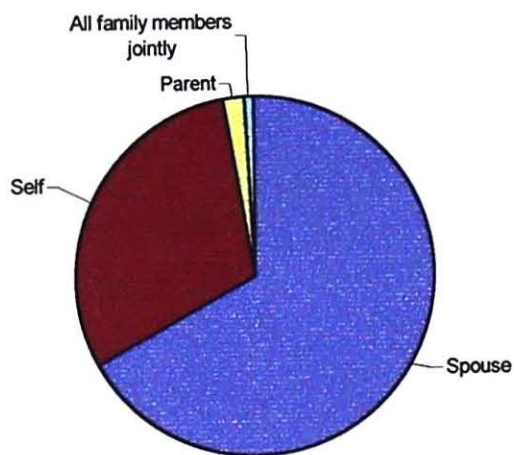


Table 5.6: Reasons for not Treating RTI/STI.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Feels ashamed/shy	1	NC	1	NC
Unaware of the place of treatment	-	-	1	NC
Financial reasons	10	NC	3	NC
No time	5	NC	-	-
Total	16	100.00	5	NC

NC= Not Calculated due to smaller number.

5.3 Interaction with the Spouse

The data in the Table 5.7 gives finding of the survey on the interaction with spouse among those who suffered from any of the RTI in the past. It may be seen from the same table that over 82 and 77 per cent of the women and men respectively who suffered from one or more of the RTI in the past did discuss it with their spouse about the disease and reported that their respective spouse were very supportive to the whole thing as majority said that the spouse reaction was sympathetic. Nevertheless, there were few of them who said that their spouse was shocked (about 5 per cent among women) or got angry (about 3 per cent) after learning about RTI. It is interesting to note that about a quarter of the women told that their husband did not react after she told him about her disease.

Table 5.7: Interaction with the Spouse in the past sickness.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Per cent who discussed with spouse*	346	82.38	17	77.27
Spouse Reaction				
Shocked	17	4.91	2	NC
Angry	9	2.60	1	NC
Sympathetic	231	66.76	6	NC
No reaction	89	25.72	8	NC
Total	346	100.00	17	NC
Reason for not discussing with the spouse				
Got Scared	3	5.66	-	-
Did not feel the need	43	81.13	4	NC
Others advised to do so	7	13.21	-	-
Total	53	100.00	4	NC
Total	420	100.00	22	100.00

* This question was asked to only currently married respondents. Out of 420 women respondents, 21 were widowed/Divorced/Separated whereas in case of men one of the respondent was Unmarried.

Among those who did not discuss the disease with the spouse, majority told that they did not feel the need for the same and (over 81 per cent of women) whereas another 13 per cent told that they were advised by others to do so. It may be mentioned that all the 4 men who did not discuss it with their wife did not think it was necessary.

In case of the present sickness, it may be noted from the Table 5.8 that nearly three-fourth of them did discuss about the disease with their husband. On the whole, it appears that in most cases husband reacted to it positively and were very supportive. However, in about 30 per cent of the cases women told that their husband did not react when they told him about the disease. It is sad to note that among those who did not tell their husband about the disease did so as they thought it was not necessary.

Table 5.8: Interaction with the Spouse in the present sickness.

Name of the Variable	Women	
	Number	Percent
Per cent who discussed with spouse*	94	73.44
Spouse Reaction		
Shocked	1	1.06
Angry	2	2.13
Sympathetic	63	67.02
No reaction	28	29.79
Total	94	100.00
Reason for not discussing with the spouse		
Got Scared	2	7.14
Did not feel the need	22	78.57
Others advised to do so	4	14.29
Total	28	100.00
Total	420	100.00

* This question was asked to only currently married respondents. Out of 120 women respondents, 6 were widowed, divorced or separated.

Chapter 6

Availability and Accessibility of Health Care Facilities

In the present chapter we have analyzed data on the knowledge of the women and men on the availability and accessibility of various health services in their area. As usual, the data is presented separately for men and women. Further, we have included government and private health facility, their distances from the residence, mode of transport available to reach to the facility etc. We have further asked questions regarding the knowledge of the respondent on the health facilities where the treatment facility for RTI/STI is available.

6.1 Awareness of various Health Facilities

Table 6.1 gives the results related to the awareness of the respondents on the availability of both government and private health facilities and health personnel. It may be noted that among the various public health facilities, sub-centre (SC), primary health centre (PHC) and government hospital (GH) were known to a large number of the women and men respondents. However, very few of the respondents were aware of either rural hospital (RH) or government dispensaries (GD). As may be noted, majority of the respondents knew about the SC (women-96 per cent and men- 94 per cent), PHC (women-79 per cent and men- 81 per cent) and GH (women-62 per cent and men- 73 per cent). On the other hand only a handful of women and men respondents knew about RH and GD (ranging between 2 to 9 per cent). Further, about one third of the men respondents and nearly 24 to 29 per cent of the women respondents were aware of private clinic (PC) and private hospitals (PH) respectively.

Table 6.1: Aware of various Health Facilities.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Aware of Health facility				
Sub Centre (SC)	447	95.51	206	93.64
Primary Health Centre (PHC)	371	79.27	178	80.91
Rural Hospitals (RH)	14	2.99	4	1.82
Government Dispensary (GD)	41	8.76	12	5.45
Government Hospital (GH)	291	62.18	161	73.18
Private Clinic (PC)	136	29.06	72	32.73
Private Hospitals (PH)	113	24.15	72	32.73

Table 6.1 continued.....

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Aware of Health Workers				
ANM	441	94.23	204	92.73
MPW	46	9.83	178	80.91
VHG	3	0.64	3	1.36
Dai	217	46.37	80	36.36
Private Doctor	130	27.78	71	32.27
Government Doctor	240	51.23	103	46.82
Mobile Health Unit	7	1.50	-	-
Total	477		220	

Coming to the knowledge of the respondents about various health personnel, it may be seen from the same table that over 93 per cent of them knew about the ANM. It is interesting to note that only about 10 per cent of the women and 81 per cent of the men knew about the MPW in their area. Relatively lower percent of women and men knew about Dai in the village. Nearly half of the men and women knew about the government doctor in their area.

6.2 Distance to the nearest health facility

In the present survey we also collected information on the distance to various health facilities from their village and the results are presented in Table 6.2. At the outset it may be mentioned that the villages covered in the present study are relatively distantly located villages from the district head quarter. The data in Table 6.2 reveals that about 86 per cent of women and 93 per cent of the men respondents the SC was within the village. For another 11 per cent of the women and 6 per cent of the men told that it was less than 3 kilometers from their village. Further about 20 and 14 per cent of the women and men respondents respectively reported that the PHC was available within their village.

A large number of the respondents have to cover longer distances to reach the nearest PHC as over 67 per cent of the women and 78 per cent of the men respondents reported that the distance to the nearest PHC was more than 3 kilometers away from their village. In fact, the distance to the nearest PHC was beyond 10 kilometers for about 19 and 22 per cent of the women and men respondents respectively. It is an important point to note, as we know that the PHC is the lowest level of facility where treatment of RTI/STI is available. Few of the villages seem to have Private Clinics and/or Hospitals.

Table 6.2: Availability and Accessibility to the nearest facility.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Distance to the nearest SC from village				
Within village	384	85.91	191	92.72
Less than 3 Kms.	50	11.19	13	6.31
3 to 10 Kms.	12	2.68	2	0.97
More than 10 Kms.	1	0.22	-	-
Distance to nearest PHC from village				
Within village	74	19.95	25	14.04
Less than 3 Kms.	49	13.21	14	7.87
3 to 10 Kms.	176	47.44	99	55.62
More than 10 Kms.	72	19.41	40	22.47
Distance to the nearest RH from village				
Within village	9	NC	-	NC
Less than 3 Kms.	-	NC	-	NC
3 to 10 Kms.	4	NC	-	NC
More than 10 Kms.	1	NC	4	NC
Distance to the nearest GD from village				
Within village	7	17.07	-	-
Less than 3 Kms.	5	12.20	-	-
3 to 10 Kms.	16	39.02	-	-
More than 10 Kms.	13	31.71	12	NC
Distance to the nearest GH from village				
Less than 10 Kms.	88	30.24	60	37.27
11 to 25 Kms.	65	22.34	41	25.47
26-50 Kms.	122	41.92	53	32.92
More than 50 Kms.	16	5.50	7	4.35
Distance to the nearest PC from village				
Within village	44	32.35	23	31.94
Less than 3 Kms.	17	12.50	6	8.33
3 to 10 Kms.	41	30.15	26	36.11
More than 10 Kms.	34	25.00	17	23.61
Distance to the nearest PH from village				
Within village	16	14.16	7	9.72
Less than 3 Kms.	14	12.39	3	4.17
3 to 10 Kms.	46	40.71	29	40.28
More than 10 Kms.	37	32.74	33	45.83

6.3 Knowledge about the Place of Treatment for RTI/STI

In the present survey we have also collected information about the knowledge of the respondents on the nearest place where treatment for RTI/STI is available and the results obtained are summarized in Table 6.3. The data reveals that about 19 per cent of men and 23 per cent of the women respondents believed that the treatment for RTI/STI is available at the SC. Further, about 28 per cent of the women and men respondents reported that the treatment for RTI/STI was available at the PHC. On the other hand, it is rather surprising to note that less than 20 per cent of the women and about 38 per cent of the men were aware that the treatment for RTI/STI was available at the Government or District Hospitals. It may be mentioned here that all the district hospitals (known as civil hospitals) have a separate department of RTI/STI. It seems that very few people are aware of this facility. In the section on the evaluation of RTI Clinics in the state we would discuss about it in more details. Beside information of the respondents regarding the available services for the treatment of RTI/STI, it is noted that very few of them know that the private hospitals and clinics also offer such services.

Table 6.3: Respondents knowledge about the Place of treatment for RTI/STI.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Who believe that it is available at				
Sub Centre (SC)	109	23.29	42	19.09
Primary Health Centre (PHC)	133	28.42	63	28.64
Rural Hospitals (RH)	1	0.21	3	1.36
Government Dispensary (GD)	14	2.99	10	4.55
Government Hospital (GH)	90	19.23	83	37.73
Private Clinic (PC)	34	7.26	34	15.45
Private Hospitals (PH)	26	5.56	23	10.45
Saying Yes to ANM				
Providing Information	226	48.29	68	30.91
Give Medicines	207	44.23	51	23.18
Saying Yes to MPW				
Providing Information	58	12.39	56	25.45
Give Medicines	75	16.03	33	15.00

The data collected in the present survey also revealed that less than half of the women respondents reported that the ANM in their area provide them with the information (about 48 per cent) as well give medicines (44 per cent) for the RTI. The corresponding figures for the men were even lower (31 and 23 per cent respectively). Similarly, very few of the women and men respondents reported that the MPWs in their

areas provide them with the information on RTI/STI (12 and 25 per cent respectively) and with the medicines (16 and 15 per cent respectively).

6.4 Interaction with the Health Workers

In the present survey, we also collected the information about the frequency of the health workers visit and their visits in the past three months period prior to the survey. The data on the same is presented in the Table 6.4 below. It may be noted that of the two-health workers- ANM and MPW, former seemed to be making more frequent visits to the people in their areas. As may be noted, about 12 and 28 per cent of the women and men respondents respectively reported that the ANM never visit them whereas half or more of the respondents reported that the MPW never visit their area. Beside this, nearly half of the women told that the ANM visit them once in a fortnight whereas another over 28 per cent told that the ANM was visiting them once a month. In other words, over three-fourth of the women respondents reported that the ANM visited them once or twice in a month. On the other hand, only about one-third of the men told that the MPW visit them once or twice a month.

Table 6.4: Health Worker's Visit.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Visit by the ANM				
Once in two weeks	234	50.00	62	28.18
Once in a month	133	28.42	58	26.36
Once in two months	37	7.91	26	11.82
Once in three months	8	1.71	12	5.45
Never	56	11.97	62	28.18
Total	468	100.00	220	100.00
Visit by the MPW				
Once in two weeks	86	18.38	35	15.91
Once in a month	60	12.82	46	20.91
Once in two months	46	9.83	21	9.55
Once in three months	12	2.56	9	4.09
Never	264	56.41	109	49.55
Total	468	100.00	220	100.00
Visited by the Health Worker in 3 months	212	45.30	46	20.91
Purpose of the Visit				
Child Immunization	49	23.11	3	6.52
ANC Services	17	8.02	2	4.35
Family Planning Supplies	11	5.19	5	10.87
Discuss other health-related matters	145	68.40	37	80.43

With regards to the visit of the health workers in the past three months period prior to the survey date, it has been found that a little over 45 per cent of the women and about 21 per cent of the men were visited by the health workers during the reference period. It is interesting to note that in most cases, the visit was for the purpose of the discussions on matters related to health (68 per cent for women and 80 per cent for men).

Table 6.5: Mode of transport used to reach to various facilities.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
For SC				
Walk	400	89.49	201	97.57
Bus	5	1.12	3	1.46
Jeep	41	9.17	1	0.49
Private Vehicle	1	0.22	1	0.49
For PHC				
Walk	73	19.68	26	14.61
Bus	111	29.92	63	35.39
Jeep	168	45.28	77	43.26
Private Vehicle	19	5.12	12	6.74
For RH				
Walk	9	NC	-	NC
Bus	1	NC	2	NC
Jeep	4	NC	2	NC
Private Vehicle	-	NC	-	NC
For GD				
Walk	6	14.63	-	-
Bus	27	65.85	7	NC
Jeep	8	19.51	4	NC
Private Vehicle	-	-	1	NC
For GH				
Walk	-	-	6	3.73
Bus	212	72.85	111	68.94
Jeep	75	25.77	38	23.60
Private Vehicle	4	1.37	6	3.73
For PC				
Walk	44	32.35	23	31.94
Bus	45	33.09	25	34.72
Jeep	46	3.82	21	29.17
Private Vehicle	1	0.74	3	4.17
For PH				
Walk	16	14.16	7	9.72
Bus	54	47.79	36	50.00
Jeep	39	34.51	26	36.11
Private Vehicle	4	3.54	3	4.17

Chapter 7

Opinion of the Respondents on the Family Health Awareness Camps

Before analyzing the opinions of the respondents on the Family Health Awareness Camps (FHAC), we would first analyze the information obtained from the official records. As mentioned before, the respondents for the present research were selected from the list of the persons who clinically tested positive in various Family Health Awareness Campaigns held in the villages at various times. The Medical Officer of the District training Team, Nashik, provided the detail list. At the time of survey it was also decided to collect all the information that was available from the official records. This included information on name of the eligible women and men, their postal address, date of screening, place of the camp, diagnosis of the sickness, advice and medicine given to them, whether referral was made, if referred then name of the referred place etc. In this section we analyze the above information along with the findings on the opinions of the respondents on the FHAC.

7.1 Finding from the Official records

At the outset, we would like to state that the team members did not face any difficulty/inconvenience in obtaining the records. The DHO, Nashik and the MO, DTT, Nashik were extremely cooperative and ensured that the records were made available to the team members. In fact the MO went to extent of helping the teams in with reading from the records etc.

Table 7.1: Summary of the results from the official records.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Place of Camp				
School	196	41.74	21	58.33
PHC	96	20.43	6	16.67
CHC/RH	4	0.85	2	5.56
Sub-Centre	174	37.02	7	19.44
Per cent advised	173	37.53	21	58.33
Per cent given medicine	456	98.92	32	88.89
Per cent referred	72	15.62	8	22.22
Number of Households	470	100.00	36	100.00

The data in Table 7.1 below gives the distribution of women and men by the place of camp and advice, medicine given and referral made to them at the time of camp. It may be noted from the table that in majority of the instances camps were held in school (42 and 58 per cent respectively for women and men) followed by Sub-centre (37 and 19 per cent respectively for women and men). In another 20 and 17 per cent cases for women and men respectively, the camps were held at the PHC.

Out of those women and men who were screened positive for RTI/STI, about 38 and 58 per cent respectively were counseled at the time of camp. This indicates that 'counseling of the client' probably did not occupy any significant place in these camps. The data also suggests that the majority of these people were given medicine for one week at the time of camp whereas about 16 per cent of the women and 22 per cent of the men were given reference slips for further treatment. It may be mentioned here that the reference slip was given to only serious cases or persons with advance stage of RTI/STI.

Although in most of the cases information was readily available from the records, for a large number of cases it was difficult to get information on the diagnosis or name of the sickness on account of either the handwriting was not legible or the information was missing. As a result of this we are unable to analyze information on this aspect.

7.2 Opinion of the Respondents about the Camps

In Tables 7.2 and 7.3 we have given data on the respondents opinion on various aspects of the camps. It may be observed from the Table 7.2 that all the 468 women surveyed were aware of the camps whereas in case of men out of 220 surveyed men 85 per cent were aware of the camp. Further, 99 per cent of the women who were aware of camps attended the camps whereas in case of men only 19 per cent attended the camps as well. It appears that the invitation cards for the camps were not distributed to all the eligible women and men as only about 46 per cent of women and 61 per cent of the men reported that the health worker gave them the invitation card before the camp was held. Nevertheless, with very few exceptions for women, all the respondents learnt about camp from the health workers. It may be noted that the camps were largely held at School, sub-centre and PHC and in most cases the place of camp was within walking distance from the residence of the respondents.

Table 7.2: Awareness and Opinion of the Respondents on Various Aspects of Camps.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Per cent aware of Camp	468	100.00	187	85.00
Among those aware of Camp:				
Per cent attended Camp	459	98.08	36	19.25
Given Invitation Card	211	45.97	22	61.11

Table 7.2 continued

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Source on information				
Govt. Health Worker	450	98.04	36	100.00
Others ¹	9	1.96	-	-
Total	459	100.00	36	100.00
Place of Camp				
School	185	40.30	21	58.33
PHC	90	19.61	6	16.67
Sub-Centre	165	35.95	9	25.00
CHC/RH	3	0.65	-	-
Other ²	16	3.49	-	-
Total	459	100.00	36	100.00
Transport Used for Camp				
Walking	456	99.35	36	100.00
Free Public Transport	2	0.44	-	-
Paid Public Transport	1	0.22	-	-
Total	459	100.00	36	100.00
Place of Camp was Okay	454	98.91	36	100.00
Reason for not Okay				
Too far	5	100.00	-	-
Spouse accompanied	62	14.22	25	75.76
Reason for not accompanied				
Did not feel necessary	78	20.86	4	NC
No time	237	63.37	4	NC
Timing inconvenient	59	15.78	0	NC
Total	374	100.00	8	NC
Number of Households	477	100.00	220	100.00

2 others include Samaj Mandir, Gram Panchayat, Temple

Although all of the men and about 99 per cent of the women felt that the place chosen for camp was okay there were five women who felt the place was a little too far. As one would expect, in only about 14 per cent of the cases the women was accompanied by their husbands whereas over three-fourth of the men told that their wives accompanied them to camp. This clearly indicates that the campaign failed to attract couples and that the involvement of men in the camps seems to be very little.

Those respondents who told that their spouse did not accompany them for camps were further asked about the reason for the same. The data reveals that 'No Time' was the most common reason given by women for the absence of the husband (63 per cent) followed

by 'did not feel necessary' by 21 per cent of the women. However, about 16 per cent of the women complained that the camp timings were inconvenient and hence their husbands could not accompany them for camp. This again indicates that the men do not involve themselves in the reproductive matters.

Table 7.3: Opinion of the respondents About the Behavior of the Staff at the Camp.

Name of the Variable	Women		Men	
	Number	Percent	Number	Percent
Behavior of the Staff at the Camp				
Was helpful	453	98.69	35	97.22
Talked nicely	454	98.91	35	97.22
Sufficient Privacy for Examination	442	96.30	35	97.22
Examination Place was Clean	456	99.35	35	97.22
Premises was clean	450	98.04	34	94.44
Waiting Time at the Camp				
No waiting time	10	2.18	2	5.56
Up to 10 minutes	90	19.61	4	11.11
11 to 20 minutes	96	20.92	17	47.22
21-30 minutes	115	25.05	5	13.89
31-60 minutes	90	19.61	7	19.44
More than an hour	58	12.64	1	2.78
Average waiting time				
Per cent Advised for Treatment	93	20.26	14	38.89
Per cent went for treatment	77	82.80	9	64.29
Distance to the place suggested				
Within walking distance	4	5.19	0	NC
Less than 5 kilometers	17	22.08	1	NC
5-10 kilometers	18	23.38	4	NC
more than 10 kilometers	32	41.56	4	NC
Do not know	6	7.79	0	NC
Total	77	100.00	9	100.00
Overall Experience at the Camp				
Very Good	66	14.38	-	-
Good	391	85.19	36	100.00
Bad	2	0.44	-	-
Number of Households	459	100.00	36	100.00

The respondents who attended the camps were also asked about their opinion on the quality of the services rendered to them at the camps. Some of the aspects of quality of care included on in the present survey are: behavior of the staff, sufficiency of the privacy for examination, cleanliness of the area, waiting time, advice given at the camp, follow up of the treatment etc. The results on these aspects are presented in the Table 7.3.

It maybe noticed from the Table 7.3 that about 97 per cent of the women and men told that the staff at the camp was very helpful and talked to them very nicely. Though over 96 per cent of the respondents felt there were sufficient privacy for examination at the camp there were few who opined that more privacy was required in such camps. At large, majority of the respondents viewed the place of camp and the surrounding areas as clean and tidy. On the whole, majority of the respondents rated their experience at the camp as good. The average waiting time for camp was 11.48 minutes for women and 26.58 minutes for men.

With respect to the advice given at the camp, it may be seen that nearly 20 per cent of the women and 39 per cent of the men told that the doctor and the ANM advised them for further treatment etc. Further, among those advised for the treatment, 83 per cent of women and 64 per cent of men went for the treatment despite the fact that the suggested place of treatment was more than 5 kilometers in most instances.

Chapter 8

Availability of Various Facilities at the RTI Clinics

In the present chapter, we discuss the findings of the present study on the availability of various facilities at the clinic including physical infrastructure and personnel. As mentioned before, in the present survey we have collected detailed information on various aspects from the 14 RTI clinics located in the civil hospitals of different districts in the state. The questionnaire used for obtaining the information for this chapter is enclosed at the end of the report. At the outset, we may mention that the information in this section has been obtained from the person in-charge of the RTI Clinic (the STD Officer).

8.1 Physical Infrastructure

The necessary data on the infrastructure of the clinics is presented in the Table 8.1. It may be seen from the table that out of the total 14 clinics covered in the present study, only 2 clinics have separate building whereas in the remaining 12 cases, the clinic was located within the hospital building. However, the signboards giving the direction for the clinic were clearly displayed in all but one clinic, making it easier for the patients to locate the clinic. On an average, the clinic has nearly three rooms (number of room ranging between one room to 5 rooms) spread over an average area of 470 square feet. The area, both insides the clinics as well as outside the clinic was very clean when the field teams visited the clinic. It may be pointed out that none of the 14 clinics covered here had a vehicle.

It may also be noted that half of the clinics have separate room for examining the patients while in the remaining clinics, the patients were examined in the doctors room that has some temporary partition. This indicates that in half of the clinics the privacy at the time of examination from the patient's point of view was very little. Nevertheless, the presence of female health worker was always ensured while examining the female patients. Ten out of the 14 clinics had waiting space with furniture for the patients.

8.2 Patient's Attendance

The data on the number of patients coming to the clinic given in the same table that reveals that on an average, about 968 patients came to the clinic for treatment in the last one-year period prior to the survey (see Table 8.1). However, the number of patients visiting the clinic ranged between 400 to 3065 patients. Further, an average of 77 patients visited the clinic in the last one month prior to the survey (ranging between 27 to 264 patients). On the day of the interview, a little 3 patients (average) visited the clinic. The possible explanations for the variations in the number of patients visiting the clinic across various districts will be

discussed later. It is further noted that the in 12 clinics, the medicines were supplied regularly and adequately. However, there were 2 clinics where the clinic in-charge faced some problems in this respect. It is important to note that in all 14 clinics, the record and registers were not only well maintained but they were up to date as well.

Table 8.1 Availability of Various Facilities at the RTI Clinics in the District Hospitals.

Total Number of Clinics: 14

Name of the Facility	Number of clinics
RTI Clinic has Separate building	2
Sign board for direction is clearly displayed	13
Cleanliness of the area inside clinic	Very clean- 14
Cleanliness of the area outside clinic	Very clean- 14
Average Area for the Clinic	470 sq. ft. (Range: 100 to 1400 sq. ft.)
Average no. of rooms for the clinic	2.71 (Range: 1 to 5 rooms)
Availability of Vehicle for the clinic	No vehicle at all- 14
Separate room for examining the patients is available	Yes, separate room-7 No, partition in doctors room- 7
Sufficient privacy at the time of examination	Yes-7 No-7
Ensure presence of female health worker while examining female patients	Yes- 14
Waiting space for the patients	Sufficient- 10, insufficient- 4
Availability of the furniture in the waiting area of the patients	Available- 10, not available- 4
Average no. of patients visiting clinic during last one year	968 patients (Range: 400 to 3065 patients)
Average no. of patients visiting clinic during last one month	77 patients (Range: 27 to 264 patients)
Average no. of patients visiting clinic on the day of the fieldwork	3.14 patients (Range: 1 to 9 patients)
Availability of counseling services at the clinic	Yes, adequate- 6 Yes, inadequate- 7 No counseling services- 1
Sufficiency and regularity of the supply of the medicines for clinic	Sufficient and regular supply- 12 Irregular and insufficient supply-2

Table 8.1 continued

Name of the Facility	Number of clinics
Records/registers for the information on the patients are filled and maintained	Yes, regularly- 14
Has National Treatment Guidelines on STD	Yes- 11, No- 3
Ask the patients about	
Symptoms	14
Onset & duration of symptoms	14
History of recent sexual contacts	14
Physically examine the patients	14
Perform following procedures on:	
Male patients-	
Retract prepuce & Squeeze Urethra	14
Female patients-	
Make her lie down	14
Retract Vulva/Labia	14
Female Genitalia exposed & examined for vaginal discharge	14
Speculum & bimanual Examined	14
Trace the source of infection	Yes- 13, No- 1
For Every STD patients, VDRL test is performed	Yes- 14
Performs Grams Stain of P. V. Discharge	Yes- 12, No- 2
Prepare KOH Smear for Candida	Yes- 9, No- 5
Undertake tests on the same day	Yes- 11, No- 3
Give report on the same day	Yes- 7, No- 7
Treat patients without waiting for Test results	Yes- 12, No- 2
Patients take full course of treatment	Yes- 12, No- 2
Provide contact slip to the patients	Yes- 7, No- 7
Bring partner after the contact slip is provided	Yes- 6, No- 1
Advise them to use Condoms	Yes- 14
Supply Condoms	Yes- 14
Perform outreach services/ IEC activities	Yes- 3, No- 11
Areas covered under outreach services	Semi-urban- 1; Urban-1 Both rural and urban- 1
Have sufficient stock of Condoms and IEC materials	Condom: Yes- 14 IEC Materials: Yes- 13, No- 1

8.3 Adherence to the National Guidelines on the Treatment of STD

It is interesting to note that although 11 of the clinics covered here had the national guidelines on the treatment of the STD there were three clinics where these guidelines were not available. The data on the questions relating to various procedures followed by the doctor while examining the patients visiting clinics revealed that the doctors ask patients about the symptoms, onset and duration of the symptoms and the detailed history of the recent sexual contacts of the patient in all cases. It is also reported that in all the clinics each patient is physically examined. It may be observed that in 13 cases, the source of infection is traced. The doctors perform all the necessary procedures like 'Retract Prepuce and Squeeze Urethra' (for male patients only), 'Retract Vulva/Labia', 'Expose Genitalia and Examine for Vaginal Discharge' and 'Speculum and Bimanual Examined' (for all the female patients).

The VDRL test is performed on all the patients suffering from the STIs in all the 14 clinics. With the exception of 2 clinics, Gram Stain of P. V. Discharge is performed in the clinics. In nine out of the 14 clinics, KOH Smear for Candida is prepared. It is further noted that in 11 clinics, tests are undertaken on the same day. However, the test reports are given to the patients on same day in only 7 cases. In majority of the cases, the treatment is started as soon as the patients come to the clinic. In fact in 12 of the clinic it was told that they start the treatment without waiting for the test report. It is encouraging to note that in majority of the cases, according to the clinic in-charge, the patients complete full course of the treatment. However, the contact slip to the patients is provided in only half of the clinics. In Six out of the seven cases where contact slip is given, it is found that the patients bring their partners with them in the next visit.

The data further suggest that in all of the clinics the patients are invariably advised to use condom. Not only this, they are also supplied with the condoms. It was surprising to note that only three clinics carry outreach services and IEC activities in their respective areas. All of the 14 clinics reportedly have adequate stocks of both condoms and the IEC materials.

8.4 Manpower, Equipment and Furniture at the Clinic

Table 8.2 gives the details of the staff strength of all the 14 clinics covered in the present analysis. It may be mentioned that we have collected information on the total number of positions sanctioned at various levels, total number of position filled at the time of survey, number of man months lost in the last two years period prior to the survey, whether the person works exclusively for the clinic, educational qualification of the present incumbent, training received by the present incumbent in the past as well as in the last one year along with the duration of the training period. Since the data is presented individually, we will not discuss it in detail. However, we would like to make few observations.

At the outset we would like to mention that the man months lost against each of the posts at various levels in all the clinics in the last two years period prior to the survey was nil indicating that all the sanctioned positions were occupied throughout the reference period. On the whole it has been found that the clinic has to share the staff with other departments of the hospitals, as there is no separate staff for the clinic exclusively.

Coming to the individual positions it may be seen from the table that all but one clinic has one STD officer post sanctioned and all the positions were filled at the time of survey. However, in Nagpur clinic there were four doctors who were treating the patients in the clinic. It may be mentioned here that this particular clinic is located in the Government Medical College. The college had 4 doctors who have specialized in this area and all four of them look after the patients in the clinic. In majority cases, the STD officers were MBBS and D.V.D. Nevertheless, in 2 clinics the STD officers were MD (skin). Further, in 7 clinics the post of gynecologist was not sanctioned whereas in one of the clinic two posts of gynecologists were sanctioned and both were filled at the time of survey. In the Nagpur Government College there are two pharmacists. One of the pharmacists looks after the work of the clinic. With respect to the nursing staff, it may be seen from the same table that in nine of the 14 clinics, one post of nursing staff was sanctioned and the post was filled as well. However, in the remaining five clinics, the post of nursing staff was not sanctioned. Similarly, the post of laboratory was sanctioned and filled in only five of the clinic. In case of remaining nine clinics, the post was not sanctioned. Three of the clinics did not have post whereas the remaining nine clinics had one post sanctioned and filled. It may be noted that with very little variations, the educational qualifications of the incumbent at the time of survey were quite similar across different clinics. Coming to the administrative staff, the post of one clerk was sanctioned and filled in only three of the clinic whereas in case of remaining 11 clinics no post was sanctioned in this category. Further, 8 of the clinic did not have any post for ward boys.

It may be mentioned here that the clinics with relatively fewer staff have shown poor performance in terms of patients coming to the clinic. For example, the clinic with annual patient of 400 had only one STD Officer and the counsellor and did not have another other staff whether it is nursing staff or administrative staff. Similarly, another clinic with 514 patients visiting annually only had one STD officer and one ward boy. In other clinics with poor performance, the clinic did not have any supporting staff. Another point that needs to be remembered here is that in most case the clinics do not have separate staff. Usually the staff is shared with the other departments of the hospital that makes it very difficult for them to cope up with the workload. Beside, the data also revealed that the clinics indicating poor attendance during the reference are the ones where supply of medicines is relatively poorer, the waiting area for the patients is either not there or is inadequate. Further, the counseling services in these clinics too are poorer and they are inadequately equipped as well. Four of the poor performing clinics do not have separate room for examining the patients.

Table 8.2: Details of the Staff Positions at the RTI Clinics

Details of the Staff	1	2	3	4	5	6	7
STD SPECIALIST							
Total Position Sanctioned	1	1	1	1	1	1	1
Total Post'n at Survey Time	1	1	1	1	1	1	1
Man Months Lost In Last 2 Yrs	Nil	Nil	Nil	Nil	Nil	Nil	Nil
Whether exclusive for Clinic	No	No	No	No	No	No	No
Edu'l qual'n of present incumbent	MBBS, DVD	MBBS, DVD	MBBS, DVD	MBBS, DVD	MBBS, DVD	MBBS, DVD	MBBS, DVD
Training received in the past	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Training received in last one yr.	No	No	No	No	No	No	No
Duration of the Training	3day	3day	3day	3day	3day	NA	3day
GYNECOLOGIST							
Total Position Sanctioned	1	0	1	1	0	0	1
Total Post'n at Survey Time	1	NA	1	1	NA	NA	1
Man Months Lost In Last 2 Yrs	Nil	NA	Nil	Nil	NA	NA	Nil
Whether exclusive for Clinic	No	NA	No	No	NA	NA	No
Edu'l qual'n of present incumbent	M.B.B.S	NA	M.D.GL	M.D.GL	NA	NA	M.B.B.S,GL
Training received in the past	No	NA	No	No	NA	NA	No
Training received in last one yr.	No	NA	No	No	NA	NA	No
Duration of the Training	NA	NA	NA	NA	NA	NA	NA
NURSES							
Total Position Sanctioned	1	0	1	1	0	0	1
Total Post'n at Survey Time	1	NA	1	1	NA	NA	1
Man Months Lost In Last 2 Yrs	Nil	NA	Nil	Nil	NA	NA	Nil
Whether exclusive for Clinic	Yes	NA	No	No	NA	NA	No
Edu'l qual'n of present incumbent	12-R.N.R.M	NA	B.P.N.,B.Sc.	B.P.N.,B.Sc.	NA	NA	B.Sc., B.P.N.
Training received in the past	No	NA	No	No	NA	NA	No
Training received in last one yr.	No	NA	No	No	NA	NA	No
Duration of the Training	NA	NA	NA	NA	NA	NA	NA

Details of the Staff	1	2	3	4	5	6	7
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LAB THCHNICIANS

Total Position Sanctioned	1	0	1	1	0	1	0
Total Post'n at Survey Time	1	NA	1	1	NA	1	NA
Man Months Lost In Last 2 Yrs	Nil	NA	Nil	Nil	NA	Nil	NA
Whether exclusive for Clinic	No	NA	No	No	NA	No	NA
Edu'l qual'n of present incumbent	M.sc.(zeo)	NA	B.Sc.,D.M.L.T.	B.Sc., D.M.L.T.	NA	B.Sc., D.M.L.T./XI-stc	NA
Training received in the past	No	NA	Yes	No	NA	No/ Attend L.T.	NA
Training received in last one yr.	No	NA	No	No	NA	No	NA
Duration of the Training	NA	NA	3day,3-month	NA	NA	NA	NA

MSW/COUNSELLERS

Total Position Sanctioned	1	1	1	1	0	1	1
Total Post'n at Survey Time	1	1	1	1	NA	1	1
Man Months Lost In Last 2 Yrs	Nil	Nil	Nil	Nil	NA	Nil	Nil
Whether exclusive for Clinic	No	No	No	No	NA	No	No
Edu'l qual'n of present incumbent	B.A. Msw	B.A.,M.S.W.	M.A.,M.S.W.	B.S.W.,M.S.W.	NA	M.S.W.	M.S.W.
Training received in the past	No	No	Yes	No	NA	No	No
Training received in last one yr.	No	No	No	No	NA	No	No
Duration of the Training	NA	NA	3 Month	NA	NA	NA	NA

Clerks

Total Position Sanctioned	1	0	1	0	0	1	0
Total Post'n at Survey Time	1	NA	1	NA	NA	1	NA
Man Months Lost In Last 2 Yrs	Nil	NA	Nil	NA	NA	Nil	NA
Whether exclusive for Clinic	No	NA	No	NA	NA	No	NA
Edu'l qual'n of present incumbent	12th	NA	10	NA	NA	Nil	NA
Training received in the past	No	NA	No	NA	NA	No	NA
Training received in last one yr.	No	NA	No	NA	NA	No	NA
Duration of the Training	NA	NA	NA	NA	NA	NA	NA

Details of the Staff	1	2	3	4	5	6	7
Driver/Ward boys							
Total Position Sanctioned	2	0	0	0	1	0	1
Total Post'n at Survey Time	2	NA	NA	NA	1	NA	1
Man Months Lost In Last 2 Yrs	Nil	NA	NA	NA	Nil	NA	Nil
Whether exclusive for Clinic	No	NA	NA	NA	No	NA	No
Edu'l qual'n of present incumbent	S.S.C.	NA	NA	NA	8 std	NA	9th std
Training received in the past	No	NA	NA	NA	No	NA	No
Training received in last one yr.	No	NA	NA	NA	No	NA	No
Duration of the Training	NA	NA	NA	NA	NA	NA	NA
Pharmacist Staff							
Total Position Sanctioned	0	0	0	0	0	0	0
Total Post'n at Survey Time	NA	NA	NA	NA	NA	NA	NA
Man Months Lost In Last 2 Yrs	NA	NA	NA	NA	NA	NA	NA
Whether exclusive for Clinic	NA	NA	NA	NA	NA	NA	NA
Edu'l qual'n of present Incumbent	NA	NA	NA	NA	NA	NA	NA
Training received in the past	NA	NA	NA	NA	NA	NA	NA
Training received in last one yr.	NA	NA	NA	NA	NA	NA	NA
Duration of the Training	NA	NA	NA	NA	NA	NA	NA

Details of the Staff	8	9	10	11	12	13	14
STD SPÉCIALIST							
Total Position Sanctioned	1	1	4	1	1	1	1
Total Post'n at Survey Time	1	1	4	1	1	1	1
Man Months Lost In Last 2 Yrs	Nil	Nil	Nil	Nil	Nil	Nil	Nil
Whether exclusive for Clinic	No	Yes	No	Yes	No	Yes	No
Edu'l qual'n of present incumbant	MBBS, DVD	M.D.Skin	M.D.Skin	MBBS, DVD	M.B.B.S.	M.B.B.S.	MBBS,D.N.B.(skin),
Training received in the past	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Training received in last one yr.	No	No	No	No	Yes	No	No
Duration of the Training	3day	NA	3day	3day	3day	3day	NA
GYNECOLOGIST							
Total Position Sanctioned	1	2	0	0	1	0	0
Total Post'n at Survey Time	1	2	NA	NA	1	NA	NA
Man Months Lost In Last 2 Yrs	Nil	Nil	NA	NA	Nil	NA	NA
Whether exclusive for Clinic	No	No	NA	NA	No	NA	NA
Edu'l qual'n of present incumbant	M.B.B.S,GL.	GL.D.G.O/GL.D.G.O	NA	NA	M.D. GL.	NA	NA
Training received in the past	No	No	NA	NA	No	NA	NA
Training received in last one yr.	No	No	NA	NA	No	NA	NA
Duration of the Training	NA	NA	NA	NA	NA	NA	NA
NURSES							
Total Position Sanctioned	1	1	1	1	0	0	1
Total Post'n at Survey Time	1	1	1	1	NA	NA	1
Man Months Lost In Last 2 Yrs	Nil	Nil	Nil	Nil	NA	NA	Nil
Whether exclusive for Clinic	Yes	Yes	Yes	Yes	NA	NA	No
Edu'l qual'n of present incumbant	B.Sc., B.P.N.	Nursing	S.S.C.,COURSE -3yr	B.Sc., B.P.N.	NA	NA	S.S.C, B.P.N.
Training received in the past	No	No	No	Yes	NA	NA	No
Training received in last one yr.	No	No	No	No	NA	NA	No
Duration of the Training	NA	NA	NA	NA	NA	NA	NA

Details of the Staff	8	9	10	11	12	13	14
LAB THCHNICIANS							
Total Position Sanctioned	0	0	1	0	0	0	0
Total Post'n at Survey Time	NA	NA	1	NA	NA	NA	NA
Man Months Lost In Last 2 Yrs	NA	NA	Nil	NA	NA	NA	NA
Whether exclusive for Clinic	NA	NA	Yes	NA	NA	NA	NA
Edu'l qual'n of present incumbent	NA	NA	B.Sc.(Bio.)	NA	NA	NA	NA
Training received in the past	NA	NA	No	NA	NA	NA	NA
Training received in last one yr.	NA	NA	No	NA	NA	NA	NA
Duration of the Training	NA	NA	NA	NA	NA	NA	NA
MSW/COUNSELLERS							
Total Position Sanctioned	1	1	1	1	1	0	0
Total Post'n at Survey Time	1	1	1	1	1	NA	NA
Man Months Lost In Last 2 Yrs	Nil	Nil	Nil	Nil	Nil	NA	NA
Whether exclusive for Clinic	No	Yes	Yes	No	No	NA	NA
Edu'l qual'n of present incumbent	M.S.W.,M.Phil	M.S.W.	M.S.W.	M.S.W.,M.A.	M.S.W.	NA	NA
Training received in the past	No	No	No	Yes	No	NA	NA
Training received in last one yr.	No	No	No	No	No	NA	NA
Duration of the Training	NA	NA	NA	NA	NA	NA	NA
Clerks							
Total Position Sanctioned	0	0	0	0	0	0	0
Total Post'n at Survey Time	NA	NA	NA	NA	NA	NA	NA
Man Months Lost In Last 2 Yrs	NA	NA	NA	NA	NA	NA	NA
Whether exclusive for Clinic	NA	NA	NA	NA	NA	NA	NA
Edu'l qual'n of present Incumbant	NA	NA	NA	NA	NA	NA	NA
Training received in the past	NA	NA	NA	NA	NA	NA	NA
Training received in last one yr.	NA	NA	NA	NA	NA	NA	NA
Duration of the Training	NA	NA	NA	NA	NA	NA	NA

Details of the Staff	8	9	10	11	12	13	14
Driver/Ward boys							
Total Position Sanctioned	0	1	0	1	1	0	0
Total Post'n at Survey Time	NA	1	NA	1	1	NA	NA
Man Months Lost In Last 2 Yrs	NA	Nil	NA	Nil	Nil	NA	NA
Whether exclusive for Clinic	NA	No	NA	No	No	NA	NA
Edu'l qual'n of present incumbent	NA	9 th std	NA	7th std	9th std	NA	NA
Training received in the past	NA	No	NA	No	No	NA	NA
Training received in last one yr.	NA	No	NA	No	No	NA	NA
Duration of the Training	NA	NA	NA	NA	NA	NA	NA
Pharmacist Staff							
Total Position Sanctioned	0	0	1	0	0	0	0
Total Post'n at Survey Time	NA	NA	1	NA	NA	NA	NA
Man Months Lost In Last 2 Yrs	NA	NA	Nil	NA	NA	NA	NA
Whether exclusive for Clinic	NA	NA	No	NA	NA	NA	NA
Edncational Qualification	NA	NA	D.Farm.	NA	NA	NA	NA
Training received in past	NA	NA	No	NA	NA	NA	NA
Training received in one Year	NA	NA	No	NA	NA	NA	NA
Duration of the Training	NA	NA	NA	NA	NA	NA	NA

The Tables 8.3 and 8.4 respectively give details of the information collected on the available equipment and furniture for the clinic along with the quantity and whether they were in working condition at the time of survey.

8.5 Difficulty Faced and the Suggestions made to overcome them

In the present survey we also asked the Clinic in-charge about the common problems faced by them as well as their suggestions to overcome these problems. The data on this is presented in Table 8.5. It may be observed that the most common problems faced were 'inadequate counseling services' (by 9 clinics); 'inadequate staff and time for the doctors as they have to share other work of the hospital'; 'irregular and insufficient supply of medicines' (reported by 4 clinics each). Some of the other difficulties reported by them are: inadequate area for both clinic as well as waiting space for the patients, inadequate furniture, insufficient and irregular supply of the medicines and condoms, absence of laboratory facilities etc. For improving the functioning of the clinics various suggestions have been made. Some of the important suggestions are; establishment of laboratory (by 6 clinics), provision of more counsellors (by 5 clinics), need for more and separate staff (by 4 clinics), and provision of vehicle for the clinic (by 3 clinics). Few of the doctors also suggested the need for separate building for the clinic, relieving doctors from the administrative work etc.

Table 8.5: Difficulties faced by the RTI Clinic staff and the suggestions made to overcome them.

Name of the Facility	No. of clinics
Important difficulties faced by the head of the clinics	
1. Inadequate counseling services	9
2. Doctors have to work in different wards	4
3. Inadequate staff (nursing and technical)	4
4. Inadequate and irregular supply of the medicines	4
5. Inadequate area for the clinic	2
6. No vehicle for the clinic	1
7. No waiting room for the patient	2
8. Inadequate sitting arrangement and furniture for the patients	4
9. Insufficient supply of the condoms	2
10. No laboratory for conducting the tests	2

Table 8.5 continued.....

Name of the Facility	No. of clinics
Suggestions to overcome the difficulties:	
1. Posts of counsellor and lab. Technician should be filled in	1
2. Separate STD Complex	3
3. More staff for the clinic should be sanctioned	4
4. Laboratory should be set up	6
5. Vehicle should be given	3
6. More counsellors are needed	5
7. Doctors should not be given administrative work	3
8. Condom supply should be regular and sufficient	1
9. VDRL and ELISA reports should be made available within three days	1
10. Separate staff for the clinic should be given	4

Table 8.3: Status of the Clinics by the Availability, Quantity and Working Status of the available equipment with the RTI Clinic

	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Serological Wathrbath	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Quantity	1	1	3	2	1	1	1	1	1	1	2	1	2	2
Working status:	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
VDRL Rotator	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Quantity	1	1	2	2	1	1	1	1	1	1	1	1	2	2
Working status:	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Binocular Microscope		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Quantity		1	4	1	1	2	3	2	1	1	1	1	2	1
Working status:		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Time Clock	Yes	Yes	Yes	Yes			Yes	Yes	Yes	Yes	Yes	Yes		Yes
Quantity	1	1	2	2			1	1	1	1	1	1		4
Working status:	Yes	Yes	Yes	Yes			Yes	Yes	Yes	Yes	Yes	Yes		Yes
Refridgerator	Yes		Yes	Yes		Yes	Yes	Yes	Yes	Yes	Yes	Yes		Yes
Quantity	2		2	1		1	4	1	1	1	2	1		1
Working status:	Yes		Yes	Yes		Yes	Yes	Yes	Yes	Yes	Yes	Yes		Yes
Hot Air Oven				Yes	Yes	Yes	Yes	Yes		Yes	Yes	Yes		Yes
Quantity				1	1	1	1	1		1	1	1		2
Working status:				Yes	Yes	Yes	Yes	Yes		Yes	Yes	Yes		Yes
Autoclave	Yes		Yes	Yes				Yes		Yes	Yes	Yes		Yes
Quantity	1		1	1				1		1	1	1		1
Working status:	Yes		Yes	Yes				Yes		Yes	Yes	Yes		Yes
Sinus & Bivaive Speculum			Yes	Yes			Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Quantity			4	1			1	1	12	2	3	10	12	3
Working status:			Yes	Yes			Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Contrifuge Machine		Yes	Yes	Yes			Yes		Yes	Yes	Yes	Yes		Yes
Quantity		1	2	1			1		1	1	2	1		4
Working status:		Yes	Yes	Yes			Yes		Yes	Yes	Yes	Yes		Yes

Table 8.3 continued.....

	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Weighing Machine	Yes								Yes					Yes
Quantity	1								1					2
Working status:	Yes								Yes					Yes-1
Focus Light with Arm	Yes													
Quantity	1													
Working status:	Yes													
Oxyegen Cylander	Yes								Yes					
Quantity	1								1					
Working status:	Yes								Yes					
Gas with Stove	Yes													
Quantity	1													
Working status:	Yes													
Test Tube Stand			Yes											
Quantity			2											
Working status:			Yes											
Pipitte													Yes	
Quantity													40	
Working status:													Yes	
Pipitte Stand			Yes											
Quantity			1											
Working status:			Yes											
Autoclave Drum			Yes	Yes										
Quantity			2	1										
Working status:			Yes	Yes										
Computer (with UPS)									Yes					
Quantity									1					
Working status:									Yes					

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Assessment of Treatment Seeking Behaviour of Women & Men
 Tested Positive for RTI/STI in the Family Health Awareness
 Campaign Held in Maharashtra during the Year 2000
 Population Research Centre,
 Gokhale Institute of Politics and Economics, Pune-4

Confidential for
 Research only

FOR WOMAN

A: IDENTIFICATION INFORMATION FROM THE REGISTERS AT THE PHC							
Name of the State: Maharashtra	<table border="1"><tr><td>1</td><td>4</td></tr></table>	1	4				
1	4						
Name of the District: Nashik	<table border="1"><tr><td>0</td><td>6</td></tr></table>	0	6				
0	6						
Name of the Tehsil/Taluka _____	<table border="1"><tr><td> </td><td> </td></tr></table>						
Name of the PHC _____	<table border="1"><tr><td> </td><td> </td></tr></table>						
Name of the Village _____	<table border="1"><tr><td> </td><td> </td></tr></table>						
Name of the Eligible Woman _____							
Address _____							
Serial No. of Woman in the register (NOT APPLICABLE= 999, NOT GIVEN= 998)	<table border="1"><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></table>						
Page Number (NOT APPLICABLE= 99, NOT GIVEN= 98)							
Date of screening							
(NA - 99)							
DAY							
MONTH							
YEAR							
	<table border="1"><tr><td>2</td><td>0</td><td>0</td><td>0</td></tr></table>	2	0	0	0		
2	0	0	0				
Diagnosis/ name of the Disease _____							
Place of the Camp: (SCHOOL- 1, PHC- 2, CHC/RH- 3, SUB-CENTRE - 4, ANGANWANDI - 5, OTHER (SPECIFY) _____ 6, NOT APPLICABLE - 9)	<table border="1"><tr><td> </td></tr><tr><td> </td></tr><tr><td> </td></tr><tr><td> </td></tr><tr><td> </td></tr></table>						
Result of screening (TESTED POSITIVE - 1, NOT APPLICABLE- 9)							
Advise given (YES - 1, NO -2, NOT APPLICABLE - 9)							
Medicine given (YES - 1, NO -2, NOT APPLICABLE - 9)							
Referral made (YES - 1, NO -2, NOT APPLICABLE - 9)							
If yes, name of the referred place (if any) _____							

Name of the Investigator _____

Signature _____

B: IDENTIFICATION FROM THE HOUSEHOLD BASE DATA

Name of the State: Maharashtra		1	4
Name of the District: Nashik		0	6
Name of the Tehsil/Taluka _____			
Name of the PHC _____			
Name of the Village _____			
Name of the Eligible Woman _____			
Name of the Husband _____			
Address _____			
Name of the Head of the Households _____			
Sex of the Head of the Households (Male-1, Female-2)			<input type="checkbox"/>
Interview Date	Day	Month	Year
	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> 2 <input type="text"/> 0 <input type="text"/> 0 <input type="text"/> 1
SCHEDULE NUMBER		<input type="text"/> <input type="text"/> <input type="text"/>	RESPONDENTS SEX
			<input type="text"/> 2

PARTICIPATION STATUS OF THE RESPONDENT

ORIGINALLY SLELECTED IN THE SAMPLE1

SPOUSE IS SELECTED IN THE SAMPLE.....2

Name of the Investigator _____

Signature _____

SECTION I: KNOWLEDGE AND PERCEPTION OF THE CAMP

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
101	Are you aware of the Family Health Awareness Camp organized by the health department in your?	Yes.....1 No.....2	→ SecII
102	Did you participate in the camp?	Yes.....1 No.....2	→ SecII
103	How did you come to know about camp?	Government Health worker A Announcement mobile unit B Village Panchayat C Given Invitation Card D Other (specify) _____ Y	
104	Did your husband accompany you for the camp?	Yes.....1 No.....2	→106
105	Why did your husband not accompany you for the camp?	Did not think it was important.....1 Did not have time.....2 Camp timing was not convenient...3 Other specify _____ 7	
106	Do you remember the place where the camp was organized?	<u>Within Village</u> School.....11 Sub-Centre..... 12 PHC.....13 CHC/RH..... 14 Other Specify_____ 17 <u>Outside the Village</u> School.....21 Sub-Centre..... 22 PHC.....23 CHC/RH..... 24 Other Specify_____ 27	
107	How did you reach the camp?	Free Public Transport A Used own transport B Private not free C Walk D Other (specify) _____ Y	
108	Do you think that the place selected for camp was convenient?	Yes.....1 No.....2	→110
109	Why do you think so? (TAKE ONLY ONE MOST IMPORTANT REASON)	_____ _____	

SECTION-I

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
110	Was the doctor at the camp helpful?	Yes.....1 No.....2	
111	Did the doctor at the camp talk to you nicely?	Yes.....1 No.....2	
112	Was there privacy at the camp during examination?	Yes.....1 No.....2	
113	In your opinion, whether examination place and the premise were clean?	VERY CLEAN - 1, NO SO CLEAN - 2, NOT CLEAN AT ALL - 3 Place of Examination <input type="checkbox"/> Overall Premise <input type="checkbox"/>	
114	How long did you have to wait at the camp? (WRITE IN MINUTES)	In minutes <input type="text"/> <input type="text"/> <input type="text"/>	
115	Did doctor advise you to go for treatment?	Yes-----1 No-----2	→119
116	Do you remember the name of the place where doctor advised you to go for treatment?	Yes-----1 No-----2	→119
117	Please tell me the name of place:	Name _____	
118	How far was the referral place from your village?	Within walking distance -----1 Within 5 Km -----2 Within 5-10 Km -----3 More than 10 km -----4 Do not know -----8	
119	After testing positive for RTI/STI, with who did you first discuss about it?	Husband-----1 Friends.....2 Mother-in-laws-----3 Mother-----4 Father-----5 Any other (specify)-----7	
120	Did you discuss about it with your husband?	Yes-----1 No-----2	→122
121	What was his reaction?	Shocked-----1 Got angry-----2 Nothing/did not react-----3 Sympathetic-----4 Any other (specify)-----7	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> →123

SECTION-I

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO				
122	Why did you not discuss with him?	Got scared.....1 Did not feel the need.....2 Others advised to do so.....3 Any other (specify)_____7					
123	Did you take treatment fir it?	Yes-----1 No-----2	→ 133				
124	Where did you go for treatment?	As referred----- 1 Different but Govt Facility----- 2 Private facility ----- 3 Any other (specify)_____ 7					
125	Who decided that you should go for treatment?	Husband-----1 Yourself-----2 In-laws-----3 Parents.....4 By all in the family jointly-----5 Any other (specify)_____ 7					
126	How many days later did you go for treatment? (WRITE IN ACTUAL DAYS)	No. of Days <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table> <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>1</td><td>6</td></tr></table> More than two weeks			1	6	→128
1	6						
127	Why did you delay treatment for so long?	Doctor at camp gave Medicine for one week----- 1 Your work was getting affected- 2 No consensus in the family -----3 Any other (specify)_____7					
128	Are you still continuing the treatment?	Yes, Continuing the treatment ---- 1 Treatment stopped, problem cured--2 Treatment stopped without cure ---3	→130 →131				
129	How much money have you so far spent on the treatment?	Amount in Rs. <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					→134
130	What was the total cost of the treatment?	Amount in Rs. <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					→134
131	How much money did you spent on the treatment?	Amount in Rs. <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>					
132	Why did you discontinue the treatment without cure?	Too Costly-----1 Affecting household work-----2 Family member not keen-----3 Husband not supportive-----4 Any other (specify)_____ 7	→134				

SECTION-I

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
133	Why did you not go for treatment?	No support from family members--1 Husband did not support-----2 Clinic/Facility too far-----3 Problem not serious-----4 No Money-----5 Any other (specify)-----7	
134	Were you given medicines at the camp?	Yes-----1 No-----2	
135	You were diagnosed with RTI/STI at the camp, has it in any way affect your life?	Yes-----1 No-----2	→137
136	Did that affect your relationships with others including your husband?	Others in family changed A With Husband changed B With neighbor changed C Any other (specify)-----Y	
137	What was your over all experience at camp?	Very good-----1 Good-----2 Bad-----3 Very bad-----4	

Section II: Background Characteristics

Q. No.	Question	Coding Category	Skip To																		
201	Type of House (BY OBSERVATION)	KACHCHA.....1 SEMI-PUCCA.....2 PUCCA3																			
202	What kind of toilet facility does your household have?	FLUSH TOILET OWNED FLUSH TOILET.....11 SHARED FLUSH TOILET12 PUBLIC FLUSH TOILET13 PIT TOILET/LATERINE OWNED PIT TOILET/LATERINE21 SHARED PIT TOILET/LATERINE ...22 PUBLIC PIT TOILET/LATERINE22 NO FACILITY/BUSH/FIELD.....31 OTHER(SPECIFY) 77																			
203	What is the main source of water for drinking and other purposes for your household?	<table border="0"> <tr> <td></td> <td align="center" colspan="2">DRINKING OTHER</td> </tr> <tr> <td>TAP</td> <td align="center">1</td> <td align="center">1</td> </tr> <tr> <td>HAND PUMP</td> <td align="center">2</td> <td align="center">2</td> </tr> <tr> <td>WELL</td> <td align="center">3</td> <td align="center">3</td> </tr> <tr> <td>RAIN/RIVER/POND/LAKE</td> <td align="center">4</td> <td align="center">4</td> </tr> <tr> <td>OTHER(SPECIFY)</td> <td align="center">7</td> <td align="center">7</td> </tr> </table>		DRINKING OTHER		TAP	1	1	HAND PUMP	2	2	WELL	3	3	RAIN/RIVER/POND/LAKE	4	4	OTHER(SPECIFY)	7	7	
	DRINKING OTHER																				
TAP	1	1																			
HAND PUMP	2	2																			
WELL	3	3																			
RAIN/RIVER/POND/LAKE	4	4																			
OTHER(SPECIFY)	7	7																			
204	How old were you at your last birthday?	Age in Completed years <input type="text"/> <input type="text"/>																			
205	How old were you at the time of your first marriage or at the time you first started living with your partner?	<table border="0"> <tr> <td></td> <td align="center">Marriage</td> <td align="center">Live in Partner</td> </tr> <tr> <td>Years</td> <td align="center"><input type="text"/> <input type="text"/></td> <td align="center"><input type="text"/> <input type="text"/></td> </tr> <tr> <td></td> <td align="center" colspan="2">Not Applicable = 99</td> </tr> </table>		Marriage	Live in Partner	Years	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>		Not Applicable = 99											
	Marriage	Live in Partner																			
Years	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>																			
	Not Applicable = 99																				
206	How old were you when you started living with your present husband/partner?	<table border="0"> <tr> <td></td> <td align="center">Husband</td> <td align="center">Partner</td> </tr> <tr> <td>Years</td> <td align="center"><input type="text"/> <input type="text"/></td> <td align="center"><input type="text"/> <input type="text"/></td> </tr> <tr> <td></td> <td align="center" colspan="2">Not Applicable = 99</td> </tr> </table>		Husband	Partner	Years	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>		Not Applicable = 99											
	Husband	Partner																			
Years	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>																			
	Not Applicable = 99																				
207	What is your present marital status?	Married-----1 Widowed-----2 Divorced/Separated-----3 Live in Relation-----4 Others, Specify _____7																			
208	How many years of schooling have you completed?	Years (completed)--- <input type="text"/> <input type="text"/> No Schooling----- 00	→ 210																		

Section II

Q. No.	Question	Coding Category	Skip To																					
209	Do you usually read a newspaper and/or a magazine at least once a week?	Yes _____1 No _____2																						
210	Do you usually listen to radio at least once a week?	Yes _____1 No _____2																						
211	Do you usually watch television at least once a week?	Yes _____1 No _____2																						
212	Do you usually go to Cinema hall or theatre to see movie at least once a month?	Yes _____1 No _____2																						
213	Please tell me about your bathing habits?	<p>NORMALLY DURING</p> <p>PERIODS</p> <table> <tr> <td>DAILY</td> <td align="center">1</td> <td align="center">1</td> </tr> <tr> <td>ALTERNATE DAY</td> <td align="center">2</td> <td align="center">2</td> </tr> <tr> <td>TWICE A WEEK</td> <td align="center">3</td> <td align="center">-</td> </tr> <tr> <td>ONCE A WEEK</td> <td align="center">4</td> <td align="center">-</td> </tr> <tr> <td>ONCE IN 15 DAYS</td> <td align="center">5</td> <td align="center">-</td> </tr> <tr> <td>ONCE IN A MONTH</td> <td align="center">6</td> <td align="center">-</td> </tr> <tr> <td>OTHER(SPECIFY)___</td> <td align="center">7</td> <td align="center">7</td> </tr> </table>	DAILY	1	1	ALTERNATE DAY	2	2	TWICE A WEEK	3	-	ONCE A WEEK	4	-	ONCE IN 15 DAYS	5	-	ONCE IN A MONTH	6	-	OTHER(SPECIFY)___	7	7	
DAILY	1	1																						
ALTERNATE DAY	2	2																						
TWICE A WEEK	3	-																						
ONCE A WEEK	4	-																						
ONCE IN 15 DAYS	5	-																						
ONCE IN A MONTH	6	-																						
OTHER(SPECIFY)___	7	7																						
214	What kind of work do you do most of the time?	Household work only _____1 Works on Own Land _____2 Works on other land _____3 Any other (specify) _____7	→217 →216																					
215	Beside household work, do you do any other work?	None _____1 Works on own land _____2 Works on other land _____3 Any other (specify) _____7	→218																					
216	Are you paid cash for this work?	Yes _____1 No _____2																						
217	Do you travel frequently out of this place for your work? On an average how many days in a month is he out on tour?	Do not work _____1 Never _____2 Up to a week in a month _____3 Fifteen days in a month _____4 More than 15 days in a month _____5 Other (specify) _____7																						
218	How many Living children you have?	<table> <tr> <td>Male</td> <td align="center">□</td> </tr> <tr> <td>Female</td> <td align="center">□</td> </tr> <tr> <td>Total</td> <td align="center">□</td> </tr> </table>	Male	□	Female	□	Total	□																
Male	□																							
Female	□																							
Total	□																							

Section II

Q. No.:	Question	Coding Category	Skip To																																
219	Did any of your Child(ren) die in the past?	Yes -----1 No -----2	→221																																
220	How many of your sons/daughters died?	Male <input type="checkbox"/> Female <input type="checkbox"/> Total <input type="checkbox"/>																																	
221	Have you ever had Still Birth, Spontaneous Abortion, Induced Abortion?	<table border="0"> <tr> <td></td> <td>YES</td> <td>NO</td> </tr> <tr> <td>Still birth(SB)</td> <td>-----1</td> <td>2</td> </tr> <tr> <td>Spont. Abortion(SA)</td> <td>-----1</td> <td>2</td> </tr> <tr> <td>Induced Abortion(IA)</td> <td>-----1</td> <td>2</td> </tr> </table>		YES	NO	Still birth(SB)	-----1	2	Spont. Abortion(SA)	-----1	2	Induced Abortion(IA)	-----1	2	If 'NO' to ALL Q223																				
	YES	NO																																	
Still birth(SB)	-----1	2																																	
Spont. Abortion(SA)	-----1	2																																	
Induced Abortion(IA)	-----1	2																																	
222	How many SB/SA/IA? (WRITE ACTUAL NUMBER)	<table border="0"> <tr> <td>Still birth(SB)-----</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Spont. Abortion(SA)---</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Induced Abortion(IA)---</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Still birth(SB)-----	<input type="checkbox"/>	<input type="checkbox"/>	Spont. Abortion(SA)---	<input type="checkbox"/>	<input type="checkbox"/>	Induced Abortion(IA)---	<input type="checkbox"/>	<input type="checkbox"/>																								
Still birth(SB)-----	<input type="checkbox"/>	<input type="checkbox"/>																																	
Spont. Abortion(SA)---	<input type="checkbox"/>	<input type="checkbox"/>																																	
Induced Abortion(IA)---	<input type="checkbox"/>	<input type="checkbox"/>																																	
223	Do you know following methods of family planning: IUD? Pills? Condom (Nirodh)? Emergency Contraceptive? Saheli Pills? MTP?	<table border="0"> <tr> <td></td> <td>YES</td> <td>NO</td> </tr> <tr> <td>IUD</td> <td>1</td> <td>2</td> </tr> <tr> <td>Pills</td> <td>1</td> <td>2</td> </tr> <tr> <td>Condom (Nirodh)</td> <td>1</td> <td>2</td> </tr> <tr> <td>Emergency Contra've</td> <td>1</td> <td>2</td> </tr> <tr> <td>Saheli Pills</td> <td>1</td> <td>2</td> </tr> <tr> <td>MTP</td> <td>1</td> <td>2</td> </tr> </table>		YES	NO	IUD	1	2	Pills	1	2	Condom (Nirodh)	1	2	Emergency Contra've	1	2	Saheli Pills	1	2	MTP	1	2	If 'NO' to ALL Q225											
	YES	NO																																	
IUD	1	2																																	
Pills	1	2																																	
Condom (Nirodh)	1	2																																	
Emergency Contra've	1	2																																	
Saheli Pills	1	2																																	
MTP	1	2																																	
224	Do you know the place where one can get them when needed? (CIRCLE ALL REPOSSES MENTIONED)	<table border="0"> <tr> <td></td> <td>IUD</td> <td>Pill</td> <td>Condom</td> </tr> <tr> <td>Sub centre</td> <td>A</td> <td>A</td> <td>A</td> </tr> <tr> <td>PHC</td> <td>B</td> <td>B</td> <td>B</td> </tr> <tr> <td>Medical Shop</td> <td>C</td> <td>C</td> <td>C</td> </tr> <tr> <td>With ANM</td> <td>D</td> <td>D</td> <td>D</td> </tr> <tr> <td>With MPW(M)</td> <td>E</td> <td>E</td> <td>E</td> </tr> <tr> <td>Do Not Know</td> <td>X</td> <td>X</td> <td>X</td> </tr> <tr> <td>Other(specify)</td> <td>Y</td> <td>Y</td> <td>Y</td> </tr> </table>		IUD	Pill	Condom	Sub centre	A	A	A	PHC	B	B	B	Medical Shop	C	C	C	With ANM	D	D	D	With MPW(M)	E	E	E	Do Not Know	X	X	X	Other(specify)	Y	Y	Y	
	IUD	Pill	Condom																																
Sub centre	A	A	A																																
PHC	B	B	B																																
Medical Shop	C	C	C																																
With ANM	D	D	D																																
With MPW(M)	E	E	E																																
Do Not Know	X	X	X																																
Other(specify)	Y	Y	Y																																
225	Current Fecundity Status : Are you currently pregnant/in PPA/in menstruation?	Currently Pregnant-----1 PPA-----2 Currently Menstruating-----3 In Menopause-----4	→ 301																																
IMPORTANT NOTE CHECK IF THE RESPONDENT IS CURRENTLY MARRIED (Q207=1) THEN ASK Q227 OTHERWISE SKIP TO Q301																																			
226	Are you/your husband currently using any family planning method?	Yes -----1 No -----2	→229																																

Section II

Q. No.	Question	Coding Category	Skip To
227	Which method are you/your husband currently using?	F Sterilisation-----1 M Sterilisation-----2 IUD-----3 Pills-----4 Condom-----5 Any other (specify)-----7	→ 232
228	Since how long have you been using this method continuously? WRITE IN MONTHS	Months <input type="text"/> <input type="text"/> <input type="text"/>	→ 232
229	Have you used any method in the last three years?	IUD-----1 Pills-----2 Condom-----3 Other (Specify) -----7 Not used any method-----5	→ 231
230	For how long did you use the method regularly? (WRITE IN MONTHS)	Months <input type="text"/> <input type="text"/>	→ 301
231	Why have you/ your husband never used any family planning? OR Why are you/your husband currently not using any family planning?	DO NOT LIKE EXISTING METHODS....1 SPOUSE AGAINST USING FP2 OTHERS IN FAMILY AGAINST FP ...3 DIFFICULT TO GET THE METHOD... 4 WANT MORE CHILDREN5 OTHER, SPECIFY-----7	→ 301
232	How many years ago did you/your husband get sterilised?	Years <input type="text"/> <input type="text"/>	→ 301

SECTION - III: AWARENESS OF RTI/STI/HIV (AIDS)

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
301	Have you heard of an illness called Reproductive Tract Infection (RTI)?	YES-----1 NO-----2	→ 305
302	From which sources of information or persons have you heard about RTI? (CIRCLE ALL RESPONSES MENTIONED)	RADIO -----A TV -----B NEWS PAPERS/BOOKS/MAGZNES---C SLOGANS/PAMPHLETS/POSTERS/ WALL HOARDINGS -----D DOCTOR -----E HEALTH WORKERS -----F SCHOOL TEACHERS -----G COMMUNITY MEETING -----H RELATIVES/FRIENDS -----I OTHER (SPECIFY) ----- Y	
303	Do you know how is RTI transmitted? (CIRCLE ALL RESPONSES MENTIONED)	HOMOSEXUAL INTERCOURSE---- A HETRO SEXUAL INTERCOURSE---B LACK OF PERSONAL HYGIENE --- C OTHER (SPECIFY) ----- Y DO NOT KNOW -----X	
304	Do you think RTI is a curable?	YES----- 1 NO----- 2 DO NOT KNOW-----8	
305	Have you heard of an illness called Sexual Transmitted Infection (STI)?	YES----- 1 NO----- 2	→ 309
306	From which sources of information or persons have you heard about STI? (CIRCLE ALL RESPONSES MENTIONED)	RADIO -----A TV -----B NEWS PAPERS/BOOKS/MAGZNES---C SLOGANS/PAMPHLETS/POSTERS/ WALL HOARDINGS -----D DOCTOR -----E HEALTH WORKERS -----F SCHOOL TEACHERS -----G COMMUNITY MEETING -----H RELATIVES/FRIENDS -----I OTHER (SPECIFY) ----- Y	
307	Do you know how is STI transmitted? (CIRCLE ALL RESPONSES MENTIONED)	HOMOSEXUAL INTERCOURSE---- A HETEROSEXUAL INTERCOURSE---B MOTHER TO CHILD -----C TRANSFUS'N OF INFECTD BLOOD- D OTHER (SPECIFY) ----- Y DO NOT KNOW-----X	
308	Do you think STI is a curable?	YES----- 1 NO----- 2 DO NOT KNOW-----8	
309	Have you heard of an illness called HIV (AIDS)?	YES----- 1 NO----- 2	→ Sec IV

SECTION-III

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO																																				
310	<p>From which sources of information or persons have you heard about HIV (AIDS)?</p> <p>(CIRCLE ALL RESPONSES MENTIONED)</p>	RADIO _____A TV _____B NEWS PAPERS/BOOKS/MAGZINES____C SLOGANS/PAMPHLETS/POSTERS/ WALL HOARDINGS _____D DOCTOR- _____E HEALTH WORKERS _____F SCHOOL TEACHERS _____G COMMUNITY MEETING _____H RELATIVES/FRIENDS _____I OTHER (SPECIFY) _____ Y																																					
311	<p>Do you know how is HIV (AIDS) transmitted?</p> <p>(CIRCLE ALL RESPONSES MENTIONED)</p>	HOMOSEXUAL INTERCOURSE____A HETEROSEXUAL INTERCOURSE____B NEEDLE/BLADE/SKIN PUNCTURE____C MOTHER TO CHILD _____D TRANSFUSION OF INFCTD BLOOD____E OTHER (SPECIFY) _____ Y DO NOT KNOW _____ X																																					
312	<p>Do you think that one can get HIV (AIDS) from someone who has HIV (AIDS) by:</p>	<table border="0"> <thead> <tr> <th></th> <th align="center" colspan="3">YES NO</th> </tr> </thead> <tbody> <tr> <td>DK</td> <td></td> <td></td> <td></td> </tr> <tr> <td>SHAKING HANDS_____</td> <td align="center">1</td> <td align="center">2</td> <td align="center">8</td> </tr> <tr> <td>HUGGING_____</td> <td align="center">1</td> <td align="center">2</td> <td align="center">8</td> </tr> <tr> <td>KISSING_____</td> <td align="center">1</td> <td align="center">2</td> <td align="center">8</td> </tr> <tr> <td>SHARING CLOTHE_____</td> <td align="center">1</td> <td align="center">2</td> <td align="center">8</td> </tr> <tr> <td>SHAR'G EATING UTEN'L</td> <td align="center">1</td> <td align="center">2</td> <td align="center">8</td> </tr> <tr> <td>STEPPING ON URINE/STOOL</td> <td align="center">1</td> <td align="center">2</td> <td align="center">8</td> </tr> <tr> <td>MOSQUITO, FLEA OR BEDBUG BITES_____</td> <td align="center">1</td> <td align="center">2</td> <td align="center">8</td> </tr> </tbody> </table>		YES NO			DK				SHAKING HANDS_____	1	2	8	HUGGING_____	1	2	8	KISSING_____	1	2	8	SHARING CLOTHE_____	1	2	8	SHAR'G EATING UTEN'L	1	2	8	STEPPING ON URINE/STOOL	1	2	8	MOSQUITO, FLEA OR BEDBUG BITES_____	1	2	8	
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MOSQUITO, FLEA OR BEDBUG BITES_____	1	2	8																																				
313	<p>How do you think one can avoid HIV (AIDS)?</p> <p>(CIRCLE ALL RESPONSES MENTIONED)</p>	SEX WITH ONLY ONE PARTNER____A USING CONDOMS DURING EACH SEXUAL INTERCOURSE____B CHECKING BLOOD PRIOR TO TRANSFUSION _____C STERILIZING NEEDLES AND SYRINGES FOR INJECTION _____D AVOIDING PREGNANCY WHEN HAVING HIV (AIDS) _____E OTHER (SPECIFY) _____ Y DO NOT KNOW _____X																																					
314	<p>Do you think HIV (AIDS) can be cured?</p>	YES _____1 NO _____2 DO NOT KNOW _____8																																					

SECTION IV: PREVALENCE OF RTI/STI

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
401	In the past, did you have burning sensation, pain or difficulty while urinating?	YES-----1 NO-----2	
402	In the past, did you experience pain in the lower abdomen or vagina during intercourse?	YES-----1 NO-----2	
403	In the past, did you have any problem of vaginal discharge?	YES-----1 NO-----2	
IF 'YES' TO Q401, Q402 AND Q403 THEN ASK Q404 TO Q416 OTHERWISE GO TO Q417			
404	What was the nature of discharge?	Mucoid non foul smelling/small in amount, present only on certain days (normal)-----1 Thick curdy white-----2 Thin dirty white foul smelling-----3 Thick grey white foul smelling-----4	
405	With vaginal discharge did you experience itching or ulcers on both the sides in the vaginal area?	ITCHING-----1 ULCERS-----2 BOTH-----3 NONE-----4	
406	With the discharge, did you have severe lower abdominal pain?	YES-----1 NO-----2	
407	With the discharge, did you also have fever?	YES-----1 NO-----2	
408	Did you discuss about it with your husband?	Yes-----1 No-----2	→ 410
409	What was his reaction?	Shocked-----1 Got angry-----2 Nothing/did not react-----3 Sympathetic-----4 Any other (specify)-----7	→ 411
410	Why did you not discuss about it with your husband?	Got scared-----1 Did not feel the need-----2 Others advised to do so-----3 Any other (specify)-----7	
411	Did you take treatment?	Yes-----1 No-----2	→ 416
412	Where did you go for treatment? (CIRCLE ALL RESPONSES MENTIONED)	GOVERNMENT DOCTOR-----A PRIVATE DOCTOR-----B ANM/LHV/GOVT- NURSE-----C PRIVATE NURSE-----D MEDICAL SHOP/PHARMACIST-----E TRADITIONAL PRACTITIONER-----F DAI-----G RELATIVE/FRIENDS-----H SELF-TREATMENT-----I OTHER(Specify)-----Y	

SECTION IV

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO			
413	Who decided that you take treatment?	Husband-----1 Yourself-----2 Parent -----3 By all in the family jointly-----4 Any other (specify)-----7				
414	Was the problem cured?	Yes.....1 No.....2				
415	How much did you spent on the treatment?	Amount in Rs. <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>				→ 417
416	What was the most important reason you did not seek any medical treatment?	Financial reasons1 Spouse did not permit2 Others in family did not allow3 Did not know where to go...4 Felt ashamed and shy.....5 Did not get time.....6 Any other (specify)-----7				
417	Are you presently suffering from burning sensation, pain or difficulty while urinating?	YES -----1 NO -----2				
418	Do you presently experience from pain in the lower abdomen or vagina during intercourse?	YES -----1 NO -----2				
419	Do you presently suffer from any vaginal discharge?	YES -----1 NO -----2				
IF 'YES' TO Q417, Q418 & Q419 THEN ASK Q420 ONWARDS OTHERWISE GO TO SECTION-V						
420	What is the nature of discharge?	Mucoid non foul smelling/ small in amount, present only on certain days (normal) ----1 Thick curdy white -----2 Thin dirty white foul smelling-----3 Thick grey white foul smelling-----4				
421	With vaginal discharge do you get itching or ulcers on both the sides in the vaginal area?	ITCHING-----1 ULCERS-----2 BOTH-----3 NONE-----4				
422	With the discharge, do you have severe lower abdominal pain?	YES-----1 NO-----2				
423	Do you have fever with the discharge?	YES-----1 NO-----2				
424	Have you discuss about it with your husband?	Yes-----1 No-----2	→ 426			

SECTION IV

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO				
425	What was his reaction?	Shocked-----1 Got angry-----2 Nothing/did not react -----3 Sympathetic-----4 Any other (specify) _____7	427				
426	Why have you not discussed about it with your husband?	Got scared1 Did not feel the need2 Others advised to do so3 Any other (specify)_____7					
427	Are you taking any treatment? If yes, from whom are you taking the treatment? (CIRCLE ALL RESPONSES MENTIONED)	GOVERNMENT DOCTOR-----A PRIVATE DOCTOR-----B ANM/LHV/GOVT- NURSE-----C PRIVATE NURSE-----D MEDICAL SHOP/PHARMACIST-----E TRADITIONAL PRACTITIONER-----F DAI-----G RELATIVE/FRIENDS-----H SELF-TREATMENT-----I OTHER(SPECIFY)_____Y NOT SEEKING ANY TREATMENT--Z	→ 434				
428	Are you satisfied with the treatment?	Yes-----1 No-----2					
429	How much did you spent on the treatment?	Amount in Rs. <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					
430	Who decided that you should go for treatment?	Husband -----1 Yourself-----2 Parent -----3 By all in the family jointly-----4 Any other (specify) _____7	→SEC V				
431	What is the most important reason you did not seek any medical treatment for your problem?	Financial reasons1 Spouse did not permit2 Others in family did not allow..... 3 Did not know where to go.....4 Felt ashamed and shy5 Did not get time.....6 Any other (specify) _____7					

Section V: Health Service Accessibility

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO																											
501	Are you aware of the following health facility?	<table border="0"> <tr> <td></td> <td align="center" colspan="2">Yes No</td> </tr> <tr> <td>Sub centre-----</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Primary Health Centre</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Community Health Center</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Government Dispensary</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Government Hospital</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Private Clinic</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Private Hospital</td> <td align="center">1</td> <td align="center">2</td> </tr> </table>		Yes No		Sub centre-----	1	2	Primary Health Centre	1	2	Community Health Center	1	2	Government Dispensary	1	2	Government Hospital	1	2	Private Clinic	1	2	Private Hospital	1	2	If 'No' to all Q504			
	Yes No																													
Sub centre-----	1	2																												
Primary Health Centre	1	2																												
Community Health Center	1	2																												
Government Dispensary	1	2																												
Government Hospital	1	2																												
Private Clinic	1	2																												
Private Hospital	1	2																												
502	How far is the facility from your residence? (IF MORE THAN 90 KM WRITE 90 AND IF IT IS WITHIN VILLAGE WRITE 00)	<table border="0"> <tr> <td></td> <td align="center" colspan="2">Distance (KM)</td> </tr> <tr> <td>Sub centre-----</td> <td align="center"><input type="text"/></td> <td align="center"><input type="text"/></td> </tr> <tr> <td>Primary Health Centre</td> <td align="center"><input type="text"/></td> <td align="center"><input type="text"/></td> </tr> <tr> <td>Community Health Center</td> <td align="center"><input type="text"/></td> <td align="center"><input type="text"/></td> </tr> <tr> <td>Government Dispensary</td> <td align="center"><input type="text"/></td> <td align="center"><input type="text"/></td> </tr> <tr> <td>Government Hospital</td> <td align="center"><input type="text"/></td> <td align="center"><input type="text"/></td> </tr> <tr> <td>Private Clinic</td> <td align="center"><input type="text"/></td> <td align="center"><input type="text"/></td> </tr> <tr> <td>Private Hospital</td> <td align="center"><input type="text"/></td> <td align="center"><input type="text"/></td> </tr> <tr> <td colspan="3">NA = 99 DK =98</td> </tr> </table>		Distance (KM)		Sub centre-----	<input type="text"/>	<input type="text"/>	Primary Health Centre	<input type="text"/>	<input type="text"/>	Community Health Center	<input type="text"/>	<input type="text"/>	Government Dispensary	<input type="text"/>	<input type="text"/>	Government Hospital	<input type="text"/>	<input type="text"/>	Private Clinic	<input type="text"/>	<input type="text"/>	Private Hospital	<input type="text"/>	<input type="text"/>	NA = 99 DK =98			
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Private Hospital	<input type="text"/>	<input type="text"/>																												
NA = 99 DK =98																														
503	What is the main Mode.of transport to reach there? BUS=1 RAILWAY=2 CYCLE/SCOOTER=3 TRACTOR/CAR=4 OTHER (SPECIFY)=5	<table border="0"> <tr> <td></td> <td align="center">Mode of transport</td> </tr> <tr> <td>Sub centre-----</td> <td align="center"><input type="text"/></td> </tr> <tr> <td>Primary Health Centre</td> <td align="center"><input type="text"/></td> </tr> <tr> <td>Community Health Center</td> <td align="center"><input type="text"/></td> </tr> <tr> <td>Government Dispensary</td> <td align="center"><input type="text"/></td> </tr> <tr> <td>Government Hospital</td> <td align="center"><input type="text"/></td> </tr> <tr> <td>Private Clinic</td> <td align="center"><input type="text"/></td> </tr> <tr> <td>Private Hospital</td> <td align="center"><input type="text"/></td> </tr> <tr> <td colspan="2">NA = 99 DK =98</td> </tr> <tr> <td colspan="2">More than 95 =95</td> </tr> </table>		Mode of transport	Sub centre-----	<input type="text"/>	Primary Health Centre	<input type="text"/>	Community Health Center	<input type="text"/>	Government Dispensary	<input type="text"/>	Government Hospital	<input type="text"/>	Private Clinic	<input type="text"/>	Private Hospital	<input type="text"/>	NA = 99 DK =98		More than 95 =95									
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Private Hospital	<input type="text"/>																													
NA = 99 DK =98																														
More than 95 =95																														
504	Are you aware of following health provider in your area?	<table border="0"> <tr> <td>ANM</td> <td align="center">A</td> </tr> <tr> <td>Male Health Worker</td> <td align="center">B</td> </tr> <tr> <td>Village health guide</td> <td align="center">C</td> </tr> <tr> <td>Dai</td> <td align="center">D</td> </tr> <tr> <td>Private doctor</td> <td align="center">E</td> </tr> <tr> <td>Govt. Doctor</td> <td align="center">F</td> </tr> <tr> <td>Mobile health unit</td> <td align="center">G</td> </tr> <tr> <td>Other (Specify) _____</td> <td align="center">Y</td> </tr> <tr> <td>Do not know</td> <td align="center">X</td> </tr> </table>	ANM	A	Male Health Worker	B	Village health guide	C	Dai	D	Private doctor	E	Govt. Doctor	F	Mobile health unit	G	Other (Specify) _____	Y	Do not know	X	→ STOP									
ANM	A																													
Male Health Worker	B																													
Village health guide	C																													
Dai	D																													
Private doctor	E																													
Govt. Doctor	F																													
Mobile health unit	G																													
Other (Specify) _____	Y																													
Do not know	X																													

Section - V Contd....

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES		SKIP TO
505	Do you Know from where one can get treatment for RTI/STI?	Sub centre—	A	
		Primary Health Centre	B	
		Community Health Center	C	
		Government Dispensary	D	
		Government Hospital	E	
		Private Clinic	F	
		Private Hospital	G	
		Others(specify) _____	Y	
		Do not know	X	
506	Do you know that the ANM and MPW (male) provide information and some medicine for RTI/STI?	ANM	Yes No	
		Provide Information	1 2	
		Medicine	1 2	
		MPW(Male)		
		Provide Information	1 2	
		Medicine	1 2	
507	How frequently you meet ANM and MPW (male)?	ANM	MPW(M)	
		once in 15 days	1 1	
		once in a month	2 2	
		once in two months	3 3	
		once in three months	4 4	
		Never	5 5	
508	During last three months have you met ANM and MPW (M)?	ANM	MPW(M)	If 'No' to both
		Yes	1 1	
		No	2 2	STOP
509	What was the purpose of meeting? (CIRCLE ALL RESPONSES GIVEN)	Child Immunization—	A	STOP
		ANC services—	B	
		Supply of Family Planning Method (If not Sterilized)—	C	
		Any Other Health Problem (specify)—	D	

Assessment of Treatment Seeking Behaviour of Women and Men
 Screened with RTI/STI in the Family Health Awareness Campaign
 in Maharashtra during June 2000

Confidential for
 Research only

Population Research Centre,
 Gokhale Institute of Politics and Economics,
 Pune (2001)

QUESTIONNAIRE FOR MAN ONLY

A: IDENTIFICATION INFORMATION FROM THE REGISTERS AT THE PHC	
Name of the State: Maharashtra	<input type="text" value="1"/> <input type="text" value="4"/>
Name of the District: Nashik	<input type="text" value="0"/> <input type="text" value="6"/>
Name of the Tehsil/Taluka _____	<input type="text"/> <input type="text"/>
Name of the PHC _____	<input type="text"/> <input type="text"/>
Name of the Village _____	<input type="text"/> <input type="text"/>
Name of the Eligible Man _____	
Address _____	
Serial No. of the Man in the register (NOT APPLICABLE= 999, NOT GIVEN= 998)	<input type="text"/> <input type="text"/> <input type="text"/>
Page Number (NOT APPLICABLE= 99, NOT GIVEN= 98)	<input type="text"/> <input type="text"/>
Date of screening DAY MONTH YEAR (NA - 99)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Diagnosis/ name of the Disease _____	
Place of the Camp: (SCHOOL- 1, PHC-2, CHC/RH- 3, SUB-CENTRE - 4, ANGANWANDI - 5, OTHER (SPECIFY) _____ 6, NOT APPLICABLE - 9)	<input type="text"/>
Result of screening (TESTED POSITIVE - 1, NOT APPLICABLE- 9)	<input type="text"/>
Advise given (YES - 1, NO -2, NOT APPLICABLE - 9)	<input type="text"/>
Medicine given(YES - 1, NO -2, NOT APPLICABLE - 9)	<input type="text"/>
Referral made..... (YES - 1, NO -2, NOT APPLICABLE - 9)	<input type="text"/>
If yes, name of the referred place (if any) _____	

Name of the Investigator _____

Signature _____

B: IDENTIFICATION FROM THE HOUSEHOLD BASE DATA

Name of the State: Maharashtra		1	4									
Name of the District: Nashik		0	6									
Name of the Tehsil/Taluka _____												
Name of the PHC _____												
Name of the Village _____												
Name of the Eligible Man _____												
Name of the wife _____												
Address _____												
Name of the Head of the Households _____				<input type="checkbox"/>								
Sex of the Head of the Households (Male-1, Female-2)												
Interview Date	Day	Month	Year									
	<table border="1" style="display: inline-table; width: 30px; height: 30px;"> <tr><td> </td><td> </td></tr> </table>			<table border="1" style="display: inline-table; width: 30px; height: 30px;"> <tr><td> </td><td> </td></tr> </table>			<table border="1" style="display: inline-table; width: 40px; height: 30px;"> <tr><td>2</td><td>0</td><td>0</td><td>1</td></tr> </table>	2	0	0	1	
2	0	0	1									
SCHEDULE NUMBER				RESPONDENTS SEX								
				<input type="checkbox"/> 1								

PARTICIPATION STATUS OF THE RESPONDE

ORIGINALLY SLELECTED IN THE SAMPLE1

SPOUSE IS SELECTED IN THE SAMPLE.....2

Name of the Investigator _____

Signature _____

SECTION I: KNOWLEDGE AND PERCEPTION OF THE CAMP

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
101	Are you aware of the Family Health Awareness Camp organized by the health department in your?	Yes.....1 No.....2	→Sec II
102	Did you participate in the camp? (Explain about the camp in Brief)	Yes.....1 No.....2	→Sec II
103	How did you come to know about camp?	Government Health worker A Announcement mobile unit B Village Panchayat C Given Invitation Card D Other (specify) _____ Y	
104	Did your wife accompany you for the camp?	Yes.....1 No.....2	→106
105	Why did your wife not accompany you for the camp?	Did not think it was important.....1 Did not have time.....2 Camp timing was not convenient...3 Other specify _____ 7	
106	Do you remember the place where the Camp was organized?	<u>Within Village</u> School.....11 Sub-Centre..... 12 PHC.....13 CHC/RH..... 14 Other Specify _____ 17 <u>Outside the Village</u> School.....21 Sub-Centre..... 22 PHC.....23 CHC/RH..... 24 Other Specify _____ 27	
107	How did you reach the camp?	Free Public Transport A Used own transport B Private not free C Walk D Other (specify) _____ Y	
108	Do you think that the place selected for camp was convenient?	Yes.....1 No.....2	→110
109	Why do you think so? (TAKE ONLY ONE MOST IMPORTANT REASON)	_____ _____	

SECTION-I

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
110	Was the doctor at the camp helpful?	Yes.....1 No.....2	
111	Did the doctor at the camp talk to you nicely?	Yes.....1 No.....2	
112	Was there privacy at the camp during examination?	Yes.....1 No.....2	
113	In your opinion, whether the examination places and other premise clean?	VERY CLEAN - 1, NO SO CLEAN - 2, NOT CLEAN AT ALL - 3 Place of Examination <input type="checkbox"/> Overall Premise <input type="checkbox"/>	
114	How long did you have to wait at the camp? (WRITE IN MINUTES)	In minutes <input type="text"/> <input type="text"/> <input type="text"/>	
115	Did doctor advise you to go for treatment?	Yes.....1 No.....2	→119
116	Do you remember the name of the place where doctor advised you to go for treatment?	Yes.....1 No.....2	→119
117	Please tell me the name of place:	Name _____	
118	How far was the referral place from your village?	Within walking distance -----1 Within 5 Km -----2 Within 5-10 Km -----3 More than 10 km -----4 Do not know -----8	
119	After testing positive for RTI/STI, whom did you first discuss about it?	Wife -----1 Friends.....2 Mother-in-laws-----3 Mother-----4 Father-----5 Any other (specify)-----7	
120	Did you discuss about it with wife?	Yes.....1 No.....2	→122
121	What was her reaction?	Shocked-----1 Got angry-----2 Nothing/did not react-----3 Sympathetic-----4 Any other (specify)-----7	→123

SECTION-I

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
122	Why did you not discuss with your wife?	Got scared.....1 Did not feel the need.....2 Others advised to do so.....3 Any other (specify) _____7	
123	Did you take treatment?	Yes.....1 No.....2	→ 133
124	Where did you go for treatment?	As referred.....1 Different but Govt Facility.....2 Private facility3 Any other (specify) _____7	
125	Who decided that you should go for treatment?	Wife1 Yourself2 Parent3 By all in the family jointly4 Any other (specify) _____7	
126	How many later did you go for treatment? (WRITE IN ACTUAL DAYS)	No. of Days <input type="text" value=""/> <input type="text" value=""/> <input type="text" value="1"/> <input type="text" value="6"/> More than two weeks	→ 128
127	Why did it take you so long to start the treatment?	Doctor at camp gave Medicine for one week.....1 Your work was getting affected- 2 No consensus in the family3 Any other (specify) _____7	
128	Are you still continuing the treatment?	Yes, Continuing the treatment ----1 Treatment stopped, problem cured-2 Treatment stopped without cure ---3	→ 130 → 131
129	How much money have you so far spent on the treatment?	Amount in Rs. <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	→ 134
130	What was the total cost of the treatment?	Amount in Rs. <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	→ 134
131	How much money did you spend on the treatment?	Amount in Rs. <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	
132	Why did you discontinue the treatment without cure?	Too Costly.....1 Affecting household work.....2 Family member not keen.....3 Wife not supportive4 Any other (specify) _____7	→ 134

SECTION-I

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
133	Why did you not go for treatment?	No support from family members --1 Wife did not support -----2 Clinic/Facility too far -----3 Problem not serious -----4 No Money -----5 Others (Specify) -----7	
134	Were you given medicines at the camp?	Yes-----1 No-----2	
135	You were diagnosed with RTI/STI at the camp, has it affected your life?	Yes-----1 No-----2	→137
136	Did that affected your relationships with others including your husoand?	Others in family changed A With Husband changed B With neighbor changed C Any other (specify)_____Y	
137	What was your over all experience at camp?	Very good-----1 Good-----2 Bad-----3 Very bad-----4	

Section II: Background Characteristics

Q-No.	Question	Coding Category	Skip To																		
201	Type of House (BY OBSERVATION)	KACHCHA.....1 SEMI-PUCCA.....2 PUCCA3																			
202	What kind of toilet facility does your household have?	FLUSH TOILET OWNED FLUSH TOILET.....11 SHARED FLUSH TOILET12 PUBLIC FLUSH TOILET13 PIT TOILET/LATERINE OWNED PIT TOILET/LATERINE21 SHARED PIT TOILET/LATERINE ...22 PUBLIC PIT TOILET/LATERINE22 NO FACILITY/BUSH/FIELD.....31 OTHER(SPECIFY) 77																			
203	What is the main source of water for drinking and other purposes for your household?	<table border="0"> <tr> <td></td> <td align="center" colspan="2">DRINKING OTHER</td> </tr> <tr> <td>TAP</td> <td align="center">1</td> <td align="center">1</td> </tr> <tr> <td>HAND PUMP</td> <td align="center">2</td> <td align="center">2</td> </tr> <tr> <td>WELL</td> <td align="center">3</td> <td align="center">3</td> </tr> <tr> <td>RAIN/RIVER/POND/LAKE</td> <td align="center">4</td> <td align="center">4</td> </tr> <tr> <td>OTHER(SPECIFY)</td> <td align="center">7</td> <td align="center">7</td> </tr> </table>		DRINKING OTHER		TAP	1	1	HAND PUMP	2	2	WELL	3	3	RAIN/RIVER/POND/LAKE	4	4	OTHER(SPECIFY)	7	7	
	DRINKING OTHER																				
TAP	1	1																			
HAND PUMP	2	2																			
WELL	3	3																			
RAIN/RIVER/POND/LAKE	4	4																			
OTHER(SPECIFY)	7	7																			
204	How old were you at your last birthday?	Age in Completed years <input type="text"/> <input type="text"/>																			
205	How old were you at the time of your first marriage or at the time you first started living with your partner?	<table border="0"> <tr> <td></td> <td align="center">Marriage</td> <td align="center">Live in Partner</td> </tr> <tr> <td>Years</td> <td align="center"><input type="text"/> <input type="text"/></td> <td align="center"><input type="text"/> <input type="text"/></td> </tr> <tr> <td></td> <td align="center" colspan="2">Not Applicable = 99</td> </tr> </table>		Marriage	Live in Partner	Years	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>		Not Applicable = 99											
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Years	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>																			
	Not Applicable = 99																				
206	How old were you when you started living with your present wife/partner?	<table border="0"> <tr> <td></td> <td align="center">Wife</td> <td align="center">Partner</td> </tr> <tr> <td>Years</td> <td align="center"><input type="text"/> <input type="text"/></td> <td align="center"><input type="text"/> <input type="text"/></td> </tr> <tr> <td></td> <td align="center" colspan="2">Not Applicable = 99</td> </tr> </table>		Wife	Partner	Years	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>		Not Applicable = 99											
	Wife	Partner																			
Years	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>																			
	Not Applicable = 99																				
207	What is your present marital status?	Married-----1 Widowed-----2 Divorced/Separated-----3 Live in Relation-----4 Others, Specify _____7																			
208	How many years of schooling have you completed?	Years(completed)-- <input type="text"/> <input type="text"/> No Schooling-----00	→210																		

Section II

Q. No.	Question	Coding Category	Skip To																					
209	Do you usually read a newspaper and/or a magazine at least once a week?	Yes _____1 No _____2																						
210	Do you usually listen to radio at least once a week?	Yes _____1 No _____2																						
211	Do you usually watch television at least once a week?	Yes _____1 No _____2																						
212	Do you usually go to Cinema hall or theatre to see movie at least once a month?	Yes _____1 No _____2																						
213	Please tell me about how often do you normally bath?	DAILY _____ 1 ALTERNATE DAY _____2 TWICE A WEEK _____3 ONCE A WEEK _____4 ONCE IN 15 DAYS _____5 ONCE IN A MONTH _____6 OTHER(SPECIFY) _____7 _____																						
214	What kind of work do you do most of the time?	Works on Own Land _____1 Works on other's land _____2 Any other (Specify) _____3 _____																						
215	Are you paid cash for this work?	Yes _____1 No _____2																						
216	Do you travel frequently out of this place for your work? On an average how many days in a month is he out on tour?	Never.....1 Up to a week in a month.....2 Fifteen days in a month.....3 More than 15 days in a month.....4 Other (specify) _____7																						
217	Do you know following family planning method: IUD? Pills? Condom (Nirodh)? Emergency Contraceptive? Saheli Pills? MTP?	<table border="0"> <tr> <td></td> <td>YES</td> <td>NO</td> </tr> <tr> <td>IUD</td> <td>1</td> <td>2</td> </tr> <tr> <td>Pills</td> <td>1</td> <td>2</td> </tr> <tr> <td>Condom (Nirodh)</td> <td>1</td> <td>2</td> </tr> <tr> <td>Emergency contra'tive</td> <td>1</td> <td>2</td> </tr> <tr> <td>Saheli Pills</td> <td>1</td> <td>2</td> </tr> <tr> <td>MTP</td> <td>1</td> <td>2</td> </tr> </table>		YES	NO	IUD	1	2	Pills	1	2	Condom (Nirodh)	1	2	Emergency contra'tive	1	2	Saheli Pills	1	2	MTP	1	2	If 'NO' to ALL Q219
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MTP	1	2																						

Section II

Q- No.	Question	Coding Category	Skip To																																
218	Do you know the place where one can get them? (CIRCLE ALL REPOSSES MENTIONED)	<table border="0"> <tr> <td></td> <td>IUD</td> <td>Pill</td> <td>Condom</td> </tr> <tr> <td>Sub centre</td> <td>A</td> <td>A</td> <td>A</td> </tr> <tr> <td>PHC</td> <td>B</td> <td>B</td> <td>B</td> </tr> <tr> <td>Medical Shop</td> <td>C</td> <td>C</td> <td>C</td> </tr> <tr> <td>With ANM</td> <td>D</td> <td>D</td> <td>D</td> </tr> <tr> <td>With MPW(M)</td> <td>E</td> <td>E</td> <td>E</td> </tr> <tr> <td>Do Not Know</td> <td>X</td> <td>X</td> <td>X</td> </tr> <tr> <td>Other(specify)</td> <td>Y</td> <td>Y</td> <td>Y</td> </tr> </table>		IUD	Pill	Condom	Sub centre	A	A	A	PHC	B	B	B	Medical Shop	C	C	C	With ANM	D	D	D	With MPW(M)	E	E	E	Do Not Know	X	X	X	Other(specify)	Y	Y	Y	
	IUD	Pill	Condom																																
Sub centre	A	A	A																																
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Medical Shop	C	C	C																																
With ANM	D	D	D																																
With MPW(M)	E	E	E																																
Do Not Know	X	X	X																																
Other(specify)	Y	Y	Y																																
219	Are you/ your wife currently using any family planning method?	Yes -----1 No -----2	→222																																
220	Which method are you/your wife currently using?	F Sterilisation -----1 M Sterilisation -----2 IUD -----3 Pills -----4 Condom -----5 Any other (specify) -----7	→224																																
221	Since how long have you been using this method continuously? WRITE IN MOTHNS	Months <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>				→ 226																													
222	Have you used any method in the last three years?	IUD -----1 Pills -----2 Condom -----3 Other (Specify) -----7 Not used any method -----5	→ 225																																
223	For how long did you use the method regularly? (WRITE IN MONTHS)	In months <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr></table>			→ 225																														
224	How many years ago did you/your wife get sterilised?	Years <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>			→ 226																														
225	Why have you never used any family planning? OR Why are you currently not using any family planning?	DO NOT LIKE EXISTING METHODS....1 SPOUSE AGAINST USING FP2 OTHERS IN FAMILY AGAINST FP ...3 DIFFICULT TO GET THE METHOD... 4 WANT MORE CHILDREN5 OTHER, SPECIFY -----7																																	

Section II

Q- No.	Question	Coding Category	Skip To
226	<p>What method of family planning, according to you, couples who either want to delay pregnancy and/or do not want to have any more children, should use?</p> <p>(REPORT THE MOST PREFERRED METHOD)</p>	<p>FEMALE STERILIZATION -----1</p> <p>COPPER-T/LOOP -----2</p> <p>P.I.I.S-----3</p> <p>ANY OTHER FEMALE METHOD-----4</p> <p>MALE STERILIZATION -----5</p> <p>CONDOM/NIRODH -----6</p> <p>OTHER(Specify) ----- 7</p>	<p>Sec III</p>
227	<p>Why are you not preferring male method?</p> <p>(CIRCLE ALL RESPONSES MENTIONED)</p>	<p>FEAR OF IMPOTENCY -----A</p> <p>LACK OF SEXUAL PLEASURE-----B</p> <p>FEAR OF METHOD FAILURE-----C</p> <p>FEAR OF OPERATION-----D</p> <p>FEAR OF WEAKNESS-----E</p> <p>OTHER (Specify) ----- F</p>	

SECTION – III: AWARENESS OF RTI/STI/HIV (AIDS)

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
301	Have you heard of an illness called Reproductive Tract Infection (RTI)?	Yes _____ 1 No _____ 2	→ 305
302	From which sources of information or persons have you heard about RTI? (CIRCLE ALL RESPONSES MENTIONED)	RADIO _____ A TV _____ B NEWS PAPERS/BOOKS/MAGZNES _____ C SLOGANS/PAMPHLETS/POSTERS/ WALL HOARDINGS _____ D DOCTOR _____ E HEALTH WORKERS _____ F SCHOOL TEACHERS _____ G COMMUNITY MEETING _____ H RELATIVES/FRIENDS _____ I OTHER _____ J (SPECIFY)	
303	Do you know how is RTI Transmitted? (CIRCLE ALL RESPONSES MENTIONED)	HOMOSEXUAL INTERCOURSE _____ A HETRO SEXUAL INTERCOURSE _____ B LACK OF PERSONAL HYGIENE _____ C OTHER _____ D DO NOT KNOW _____ E	
304	Do you think RTI is a curable?	YES _____ 1 NO _____ 2 DO NOT KNOW _____ 9	
305	Have you heard of an illness called Sexually Transmitted Infection (STI)?	YES _____ 1 NO _____ 2	→ 309
306	From which sources of information or persons have you heard about STI? (CIRCLE ALL RESPONSES MENTIONED)	RADIO _____ A TV _____ B NEWS PAPERS/BOOKS/MAGZNES _____ C SLOGANS/PAMPHLETS/POSTERS/ WALL HOARDINGS _____ D DOCTOR _____ E HEALTH WORKERS _____ F SCHOOL TEACHERS _____ G COMMUNITY MEETING _____ H RELATIVES/FRIENDS _____ I OTHER(Specify) _____ J	
307	Do you know how is STI transmitted? (CIRCLE ALL RESPONSES MENTIONED)	HOMOSEXUAL INTERCOURSE _____ A HETEROSEXUAL INTERCOURSE _____ B MOTHER TO CHILD _____ C TRANSFUS'N OF INFECTD BLOOD _____ D OTHER(SPECIFY) _____ E DO NOT KNOW _____ F	
308	Do you think STI is a curable?	YES _____ 1 NO _____ 2 DO NOT KNOW _____ 9	
309	Have you heard of an illness called HIV (AIDS)?	YES _____ 1 NO _____ 2	→ Sec IV

SECTION III Contd.....

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO																																
310	<p>From which sources of information or persons have you heard about HIV (AIDS)?</p> <p>(CIRCLE ALL RESPONSES MENTIONED)</p>	RADIO-----A TV-----B NEWS PAPERS/BOOKS/MAGZINES--C SLOGANS/PAMPHLETS/POSTERS/ WALL HOARDINGS-----D DOCTOR-----E HEALTH WORKERS-----F SCHOOL TEACHERS-----G COMMUNITY MEETING-----H RELATIVES/FRIENDS-----I OTHER-----J																																	
311	<p>Do you know how is HIV (AIDS) transmitted?</p> <p>(CIRCLE ALL RESPONSES MENTIONED)</p>	HOMOSEXUAL INTERCOURSE---A HETEROSEXUAL INTERCOURSE--B NEEDLE/BLADE/SKIN PUNCTURE--C MOTHER TO CHILD-----D TRANSFUSION OF INFCTD BLOOD--E OTHER(Specify)-----F DO NOT KNOW-----G																																	
312	<p>Do you think that one can get HIV (AIDS) from someone who has HIV (AIDS) by:</p>	<table border="0"> <thead> <tr> <th></th> <th align="center">YES</th> <th align="center">NO</th> <th align="center">DK</th> </tr> </thead> <tbody> <tr> <td>SHAKING HANDS-----</td> <td align="center">1</td> <td align="center">2</td> <td align="center">9</td> </tr> <tr> <td>HUGGING-----</td> <td align="center">1</td> <td align="center">2</td> <td align="center">9</td> </tr> <tr> <td>KISSING-----</td> <td align="center">1</td> <td align="center">2</td> <td align="center">9</td> </tr> <tr> <td>SHARING CLOTHE-----</td> <td align="center">1</td> <td align="center">2</td> <td align="center">9</td> </tr> <tr> <td>SHAR'G EATING UTEN'L</td> <td align="center">1</td> <td align="center">2</td> <td align="center">9</td> </tr> <tr> <td>STEPPING ON URINE/STOOL</td> <td align="center">1</td> <td align="center">2</td> <td align="center">9</td> </tr> <tr> <td>MOSQUITO, FLEA OR BEDBUG BITES-----</td> <td align="center">1</td> <td align="center">2</td> <td align="center">9</td> </tr> </tbody> </table>		YES	NO	DK	SHAKING HANDS-----	1	2	9	HUGGING-----	1	2	9	KISSING-----	1	2	9	SHARING CLOTHE-----	1	2	9	SHAR'G EATING UTEN'L	1	2	9	STEPPING ON URINE/STOOL	1	2	9	MOSQUITO, FLEA OR BEDBUG BITES-----	1	2	9	
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313	<p>How do you think one can avoid HIV (AIDS)?</p> <p>(CIRCLE ALL RESPONSES MENTIONED)</p>	SEX WITH ONLY ONE PARTNER-----A USING CONDOMS DURING EACH SEXUAL INTERCOURSE-----B CHECKING BLOOD PRIOR TO TRANSFUSION-----C STERILIZING NEEDLES AND SYRINGES FOR INJECTION -----D AVOIDING PREGNANCY WHEN HAVING HIV (AIDS)-----E OTHER(Specify)-----F DO NOT KNOW-----G																																	
314	<p>Do you think HIV (AIDS) can be cured?</p>	YES-----1 NO-----2 DO NOT KNOW-----9																																	

SECTION IV: PREVALENCE OF RTI/STI

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO																		
401	Have you suffered from any of the following in the past? READ ALL ONE BY ONE	<table style="width: 100%; border: none;"> <tr> <td></td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>ANY DISCHARGE FROM PENIS</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>ANY SORE ON GENITAL OR ANAL AREA</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>POSITIVE SYPHILIS BLOOD TEST</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>DIFFICULTY/PAIN WHILE URINATING/VERY FREQUENT URINATION</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>SWELLING OF TESTES/ IN GROIN AREA (PENIS)</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </table>		YES	NO	ANY DISCHARGE FROM PENIS	1	2	ANY SORE ON GENITAL OR ANAL AREA	1	2	POSITIVE SYPHILIS BLOOD TEST	1	2	DIFFICULTY/PAIN WHILE URINATING/VERY FREQUENT URINATION	1	2	SWELLING OF TESTES/ IN GROIN AREA (PENIS)	1	2	If 'NO' TC ALL Q 411
	YES	NO																			
ANY DISCHARGE FROM PENIS	1	2																			
ANY SORE ON GENITAL OR ANAL AREA	1	2																			
POSITIVE SYPHILIS BLOOD TEST	1	2																			
DIFFICULTY/PAIN WHILE URINATING/VERY FREQUENT URINATION	1	2																			
SWELLING OF TESTES/ IN GROIN AREA (PENIS)	1	2																			
402	Did you discuss about it with your wife?	Yes-----1 No-----2	→ 404																		
403	What was her reaction?	Shocked-----1 Got angry-----2 Nothing/did not react-----3 Sympathetic-----4 Any other (specify)-----7	→ 405																		
404	Why did you not discuss about it with her?	Got scared.....1 Did not feel the need.....2 Others advised to do so.....3 Any other (specify)-----7																			
405	Did you take treatment?	Yes-----1 No-----2	→ 410																		
406	Where did you take the treatment?	GOVERNMENT DOCTOR-----A PRIVATE DOCTOR-----B ANM/LHV/GOVT- NURSE-----C PRIVATE NURSE-----D MEDICAL SHOP/PHARMACIST-----E TRADITIONAL PRACTITIONER-----F DAI-----G RELATIVE/FRIENDS-----H SELF-TREATMENT-----I OTHER(Specify)-----Y																			
407	Who decided that you take treatment?	Wife -----1 Yourself-----2 Parent -----3 By all in the family jointly-----4 Any other (specify)-----7																			
408	Did the disease get cured?	Yes.....1 No.....2																			
409	How much did you spent on the treatment?	Amount in Rs. <table style="display: inline-table; border: 1px solid black; width: 100px; height: 20px; vertical-align: middle;"><tr><td style="width: 25px; height: 20px;"></td><td style="width: 25px; height: 20px;"></td><td style="width: 25px; height: 20px;"></td><td style="width: 25px; height: 20px;"></td></tr></table>																			

SECTION IV

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO																		
410	What was the most important reason you did you not seek any medical treatment?	Financial reasons.....1 Spouse did not permit.....2 Others in family did mot allow.....3 Did not know where to go.....4 Felt ashamed and shy.....5 Did not get time.....6 Any other (specify).....7																			
411	Do you presently suffer from any of the following? READ ALL ONE BY ONE	<table border="0"> <tr> <td></td> <td align="center">YES</td> <td align="center">NO</td> </tr> <tr> <td>ANY DISCHARGE FROM PENIS</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>ANY SORE ON GENITAL OR ANAL AREA</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>POSITIVE SYPHILIS BLOOD TEST</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>DIFFICULTY/PAIN WHILE URINATING/VERY FREQUENT URINATION</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>SWELLING OF TESTEES/ IN GROIN AREA (PENIS)</td> <td align="center">1</td> <td align="center">2</td> </tr> </table>		YES	NO	ANY DISCHARGE FROM PENIS	1	2	ANY SORE ON GENITAL OR ANAL AREA	1	2	POSITIVE SYPHILIS BLOOD TEST	1	2	DIFFICULTY/PAIN WHILE URINATING/VERY FREQUENT URINATION	1	2	SWELLING OF TESTEES/ IN GROIN AREA (PENIS)	1	2	If 'NO' TO ALL 501
	YES	NO																			
ANY DISCHARGE FROM PENIS	1	2																			
ANY SORE ON GENITAL OR ANAL AREA	1	2																			
POSITIVE SYPHILIS BLOOD TEST	1	2																			
DIFFICULTY/PAIN WHILE URINATING/VERY FREQUENT URINATION	1	2																			
SWELLING OF TESTEES/ IN GROIN AREA (PENIS)	1	2																			
412	Are you consulting anyone for treatment? If yes, whom are you consulting? (CIRCLE ALL RESPONSES MENTIONED)	GOVERNMENT DOCTOR-----A PRIVATE DOCTOR-----B ANM/LHV/GOVT- NURSE-----C PRIVATE NURSE-----D MEDICAL SHOP/PHARMACIST-----E TRADITIONAL PRACTITIONER-----F DAI-----G RELATIVE/FRIENDS-----H SELF-TREATMENT-----I OTHER(SPECIFY)-----Y NOT SEEKING ANY TREATMENT--Z	→ 416																		
415	Are you satisfied with the treatment?	Yes -----1 No -----2	Sec V																		
416	What is the most important reason you are not seeking any medical treatment?	Financial reasons1 Spouse did not permit2 Others in family did mot allow..... 3 Did not know where to go.....4 Felt ashamed and shy5 Did not get time.....6 Any other (specify).....7																			

Section V: Health Service Accessibility

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO																										
501	Are you aware of the following health facility?	<table border="0"> <tr> <td></td> <td align="center">Yes</td> <td align="center">No</td> <td></td> </tr> <tr> <td>Sub centre-----</td> <td align="center">1</td> <td align="center">2</td> <td rowspan="7">} → If 'No' to all Q504</td> </tr> <tr> <td>Primary Health Centre</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Community Health Center</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Government Dispensary</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Government Hospital</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Private Clinic</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Private Hospital</td> <td align="center">1</td> <td align="center">2</td> </tr> </table>		Yes	No		Sub centre-----	1	2	} → If 'No' to all Q504	Primary Health Centre	1	2	Community Health Center	1	2	Government Dispensary	1	2	Government Hospital	1	2	Private Clinic	1	2	Private Hospital	1	2	
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Private Clinic	1	2																											
Private Hospital	1	2																											
502	How far is the facility from your residence? (IF MORE THAN 90 KM WRITE 90 AND IF IT IS WITHIN VILLAGE WRITE 00)	<table border="0"> <tr> <td></td> <td align="center" colspan="2">Distance (KM)</td> </tr> <tr> <td>Sub centre-----</td> <td align="center">□</td> <td align="center">□</td> </tr> <tr> <td>Primary Health Centre</td> <td align="center">□</td> <td align="center">□</td> </tr> <tr> <td>Community Health Center</td> <td align="center">□</td> <td align="center">□</td> </tr> <tr> <td>Government Dispensary</td> <td align="center">□</td> <td align="center">□</td> </tr> <tr> <td>Government Hospital</td> <td align="center">□</td> <td align="center">□</td> </tr> <tr> <td>Private Clinic</td> <td align="center">□</td> <td align="center">□</td> </tr> <tr> <td>Private Hospital</td> <td align="center">□</td> <td align="center">□</td> </tr> </table>		Distance (KM)		Sub centre-----	□	□	Primary Health Centre	□	□	Community Health Center	□	□	Government Dispensary	□	□	Government Hospital	□	□	Private Clinic	□	□	Private Hospital	□	□			
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Private Clinic	□	□																											
Private Hospital	□	□																											
503	What is the main Mode of transport to reach there? BUS=1 RAILWAY=2 CYCLE/SCOOTER=3 TRACTOR/CAR=4 OTHER (SPECIFY)=5	<table border="0"> <tr> <td></td> <td align="center" colspan="2">Mode of transport</td> </tr> <tr> <td>Sub centre-----</td> <td align="center">□</td> <td></td> </tr> <tr> <td>Primary Health Centre</td> <td align="center">□</td> <td></td> </tr> <tr> <td>Community Health Center</td> <td align="center">□</td> <td></td> </tr> <tr> <td>Government Dispensary</td> <td align="center">□</td> <td></td> </tr> <tr> <td>Government Hospital</td> <td align="center">□</td> <td></td> </tr> <tr> <td>Private Clinic</td> <td align="center">□</td> <td></td> </tr> <tr> <td>Private Hospital</td> <td align="center">□</td> <td></td> </tr> </table>		Mode of transport		Sub centre-----	□		Primary Health Centre	□		Community Health Center	□		Government Dispensary	□		Government Hospital	□		Private Clinic	□		Private Hospital	□				
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504	Are you aware of following health provider in your area?	<table border="0"> <tr> <td></td> <td align="center">Yes</td> <td align="center">No</td> <td></td> </tr> <tr> <td>ANM</td> <td align="center">1</td> <td align="center">2</td> <td rowspan="7">} → If 'No' to all STOP</td> </tr> <tr> <td>Male Health Worker</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Village health guide</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Dai</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Private doctor</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Gov- Doctor</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Mobile health unit</td> <td align="center">1</td> <td align="center">2</td> </tr> </table>		Yes	No		ANM	1	2	} → If 'No' to all STOP	Male Health Worker	1	2	Village health guide	1	2	Dai	1	2	Private doctor	1	2	Gov- Doctor	1	2	Mobile health unit	1	2	
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Gov- Doctor	1	2																											
Mobile health unit	1	2																											
505	Do you Know from where one can get treatment for RTI/STI?	<table border="0"> <tr> <td></td> <td align="center">Yes</td> <td align="center">No</td> </tr> <tr> <td>Sub centre-----</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Primary Health Centre</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Community Health Center</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Government Dispensary</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Government Hospital</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Private Clinic</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>Private Hospital</td> <td align="center">1</td> <td align="center">2</td> </tr> </table>		Yes	No	Sub centre-----	1	2	Primary Health Centre	1	2	Community Health Center	1	2	Government Dispensary	1	2	Government Hospital	1	2	Private Clinic	1	2	Private Hospital	1	2			
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Section - IV Contd....

Q-NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO																								
506	Do you know that the ANM and MPW (male) provide information and some medicine for RTI/STI	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="text-align: center;">ANM</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> </tr> <tr> <td>Provide Information</td> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Medicine</td> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td></td> <td style="text-align: center;">MPW(Male)</td> <td></td> <td></td> </tr> <tr> <td>Provide Information</td> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Medicine</td> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </table>		ANM	Yes	No	Provide Information	1	1	2	Medicine	1	1	2		MPW(Male)			Provide Information	1	1	2	Medicine	1	1	2	
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507	How frequently you meet ANM and MPW (male)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="text-align: center;">ANM</td> <td style="text-align: center;">MPW(M)</td> </tr> <tr> <td>once in 15 days</td> <td style="text-align: center;">1</td> <td style="text-align: center;">1</td> </tr> <tr> <td>once in a month</td> <td style="text-align: center;">2</td> <td style="text-align: center;">2</td> </tr> <tr> <td>once in two months</td> <td style="text-align: center;">3</td> <td style="text-align: center;">3</td> </tr> <tr> <td>once in three months</td> <td style="text-align: center;">4</td> <td style="text-align: center;">4</td> </tr> <tr> <td>Never</td> <td style="text-align: center;">5</td> <td style="text-align: center;">5</td> </tr> </table>		ANM	MPW(M)	once in 15 days	1	1	once in a month	2	2	once in two months	3	3	once in three months	4	4	Never	5	5							
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once in a month	2	2																									
once in two months	3	3																									
once in three months	4	4																									
Never	5	5																									
508	During last three months have you met MPW(M)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Yes</td> <td style="text-align: center;">_____1</td> </tr> <tr> <td>No</td> <td style="text-align: center;">_____2</td> </tr> </table>	Yes	_____1	No	_____2	→ STOP																				
Yes	_____1																										
No	_____2																										
509	What were the reasons for meeting? (CIRCLE ALL RESPONSES GIVEN)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Child Immunization</td> <td style="text-align: center;">_____A</td> </tr> <tr> <td>ANC services</td> <td style="text-align: center;">_____B</td> </tr> <tr> <td>Supply of Family Planning Method (If not Sterilized)</td> <td style="text-align: center;">_____C</td> </tr> <tr> <td>Any Other Health Problem (specify)</td> <td style="text-align: center;">_____D</td> </tr> <tr> <td colspan="2" style="border-top: 1px solid black; height: 10px;"></td> </tr> </table>	Child Immunization	_____A	ANC services	_____B	Supply of Family Planning Method (If not Sterilized)	_____C	Any Other Health Problem (specify)	_____D																	
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**SURVEY ON EVALUATION OF THE
FUNCTIONING OF RTI/STI CLINICS IN
MAHARASHTRA, 2001**

Confidential for
research only

By

**Population Research Centre,
Gokhale Institute of Politics and Economics**

IDENTIFICATION													
STATE _____ MAHARASHTRA	<table border="1" style="border-collapse: collapse; margin: auto;"> <tr> <td style="width: 20px; height: 20px; text-align: center;">1</td> <td style="width: 20px; height: 20px; text-align: center;">4</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>	1	4										
1	4												
DISTRICT _____													
NAME OF THE HOSPITAL _____													
TYPE OF HOSPITAL: GENERAL HOSPITAL-1, CIVIL HOSP.-2. OTHER SPECIFY _____ 3)	<input style="width: 30px; height: 20px;" type="checkbox"/>												
YEAR OF ESTABLISHMENT OF THE RTI/STI CLINIC	<table border="1" style="border-collapse: collapse; margin: auto;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>												
NAME OF THE HEAD/INCHARGE OF THE CLINIC													
HEAD OF THE HOUSEHOLD (MALE-1, FEMALE-2)													
INTERVIEW DATE	<table style="margin: auto;"> <tr> <td style="text-align: center;">DAY</td> <td style="text-align: center;">MONTH</td> <td style="text-align: center;">YEAR</td> </tr> <tr> <td style="text-align: center;"> <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> </td> <td style="text-align: center;"> <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> </td> <td style="text-align: center;"> <table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> </td> </tr> </table>	DAY	MONTH	YEAR	<table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>			<table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>			<table border="1" style="border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>		
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NAME & SIGNATURE OF THE INVESTIGATOR _____													

SECTION-1: MANPOWER AND INFRASTRUCTURE

A: STAFF POSITION

SR. NO.	DESCRIPTION OF THE POSITION Q101	TOTAL POSIT'NS ACTION ED Q102	TOTAL IN POST'N AT SURVEY TIME Q103	MAN MONTHS LOST IN LAST 2 YRS Q104	Whether exclusive for Clinic YES=1, NO=2 Q105
(1)	(2)	(3)	(4)	(5) = (3) - (4)	(6)
1	STD SPECIALIST				<input type="text"/>
2	GYNAECOLOGIST				<input type="text"/>
3	GDMO				<input type="text"/>
4	NURSES				<input type="text"/>
5	OTHER PARAMED'L STAFF				<input type="text"/>
6	LAB TECHNICIANS				<input type="text"/>
7	MSW/COUNSELLERS				<input type="text"/>
8	ADMIN. STAFF (CL'S II & III)				<input type="text"/>
9	CLASS - IV STAFF				<input type="text"/>
10	DRIVER				<input type="text"/>
11	Others (Specify) _____				<input type="text"/>

B: MANPOWER: INCLUDING MEDICAL DOCTORS PARAMEDICAL, NURSING STAFF, ANM, SOCIAL WORKER, LAB TECHNICIAN, COUNSELLER, ADMINISTRATIVE STAFF, PEON, DRIVER ETC.

S R. N O.	Name of the Employee Q106	Designation Q107	Work Exclusively for Clinic YES-1, NO-2 Q108	Educa-tional Quali-fication Q109	Training RECEIVED		Duration of the Training No. Of days/wea k/month s or NA Q112
					YES-1, ANY TIME IN PAST Q110	NO-2 IN LAST ONE YEAR Q111	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
			<input type="text"/>				
			<input type="text"/>				
			<input type="text"/>				
			<input type="text"/>				
			<input type="text"/>				
			<input type="text"/>				
			<input type="text"/>				

C: AVAILABILITY OF INSTRUMENTS AND LOGISTICS

SR. NO.	NAME OF THE INSTRUMENT	AVAILABLE - 1 NOT AVAILABLE - 2	QUANTITY	WORKING STATUS WORKING-1 NOT WORKING-2 UNDER REPAIR-3
	Q 113	Q 114	Q115	Q116

D: AVAILABILITY OF FURNITURE

SR. NO.	LIST OF FURNITURES	WORKING STATUS WORKING - 1; NOT WORKING - 2 UNDER REPAIR - 3
	Q117	Q118

E: AVAILABILITY OF OTHER FACILITIES / DRUGS

Q. No.	QUESTION	RESPONSES	SKIP TO
119	BY OBSERVATION Is there a separate building for the clinic?	YES.....1 NO.....2	
120	What is the total area of the clinic?	Area in square meter <input type="text"/> <input type="text"/> <input type="text"/>	
121	Whether the area inside and outside the clinic is clean? BY OBSERVATION	YES....1 NO....2 INSIDE THE CLINIC <input type="checkbox"/> OUTSIDE THE CLINIC <input type="checkbox"/>	
122	How many rooms does RTI/STI clinic have?	No. Qf rooms <input type="text"/>	
123	Whether the sign boards for directions to the Clinic clearly displayed?	YES.....1 NO.....2	
124	Whether separate examination room is available?	YES, SEPARATE ROOM.....1 NO, BUT PARTITION IN DRS ROOM.....2 NO SEPARATE PROVISION.....3	
125	Whether there is sufficient privacy at the time of examination?	YES.....1 NO.....2	
126	Does the Clinic has vehicle?	YES, SEPARATE FOR THE CLINIC.....1 YES, SHARE WITH THE HOSPITAL.....2 NO VEHICLE AT ALL3 OTHER, SPECIFY.....4	→ 130 → 130
127	How many vehicles does Clinic have?	NUMBER OF VEHICLES <input type="text"/>	

128	How old are these vehicles?	AGE OF THE VEHICLE IN YEARS VEHICLE - 1 <input type="text"/> <input type="text"/> VEHICLE - 2 <input type="text"/> <input type="text"/>	
129	Are these vehicles in working condition?	WORKING - 1 NOT WOKING - 2 UNDER REPAIR - 3 , NA - 9 VEHICLE - 1 <input type="checkbox"/> VEHICLE - 2 <input type="checkbox"/>	
130	Do you have sufficient and regular supply of the important medicines?	YES REGULAR & SUFFICIENT.....1 YES, REGULAR SUPPLY.....2 VERY POOR & INSUFFICIENT SUPPLY...3 OTHER (SPECIFY).....4	
131	Whether there are sufficient arrangements for the patients to sit while waiting for their turn?	YES - 1 NO - 2 WAITING SPACE <input type="checkbox"/> FURNITURE <input type="checkbox"/>	

F: INTERACTION WITH THE HEALTH CARE PROVIDER

Q. No.	QUESTION	RESPONSES	SKIP TO
201	Number of patients visiting the clinic	JAN. 2000 TO DEC. 2000 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DURING LAST MONTHS <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ON THE DAY OF VISIT	
202	Are there adequate counselling services at the clinic?	YES ADEQUATE.....1 YES BUT NOT ADEQUATE.....2 NO COUNSELLING SERVICES.....3	
203	Is there a prescribed format to register/record information related to the patients?	YES.....1 NO.....2	→ 205
204	Do you fill it regularly?	No. Of rooms <input type="text"/>	
205	Do ask patients about Symptoms?	YES.....1 NO.....2	
206	Do you ask patients about Onset and Duration of Symptoms?	YES.....1 NO.....2	
207	Do you ask patients about History of recent sex contact?	YES.....1 NO.....2	
208	Do you physically examine the patients?	YES.....1 NO.....2	→ 210
209	Do you carryout following procedures: FOR MALE PATIENTS ONLY 1. Retract prepuce and Squeeze urethra? FOR FEMALE PATIENTS ONLY 2. Make her lie down?	YES - 1 NO - 2 1..... <input type="checkbox"/> 2..... <input type="checkbox"/>	

	3. Retract Vulva/ Labia? 4. Female Genitalia exposed & examination for vaginal discharge? 5. Speculum & Bimanual Examination?	3..... 4..... 5.....	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
210	Do you ensure presence of a female health worker when male doctor examines a female patient?	YES.....1 NO.....2		
211	Do you perform VDRL test for every STD patient?	YES.....1 NO.....2		
212	Do you perform Grams stain of U.V. Discharge?	YES.....1 NO.....2		
213	Do you prepare KOH smear for candida?	YES.....1 NO.....2		
214	Do you undertake tests on the same day of consultation?	YES.....1 NO.....2		
215	Do you treat the patients without waiting for lab. Test report?	YES.....1 NO.....2		
216	Do you give the reports on the same day?	YES.....1 NO.....2		
217	Do you have national treatment guidelines on STD?	YES.....1 NO.....2		
218	Do patients take full course of treatment?	YES.....1 NO.....2		
219	Do you provide contact slip to the patients?	YES.....1 NO.....2		→ 221
220	Do they bring their partner?	YES.....1 NO.....2		
221	Do you trace the source of infection?	YES.....1 NO.....2		
222	Do you supply condom?	YES.....1 NO.....2		
223	Do you perform outreach services or community IEC activities?	YES.....1 NO.....2		→ 225
224	What is the area of outreach services?	URBAN.....1 SEMI-URBAN.....2 RURAL.....3 SLUM.....4		
225	Do you have sufficient stock of Condom / IEC material?	YES - 1 NO - 2	CONDOM <input type="checkbox"/> IEC MATERIAL <input type="checkbox"/>	

G: OPINION OF THE DOCTOR INCHARGE AND INTERVIEWERS GENERAL OBSERVATIONS

Q401. Please list three most important difficulties faced by you in the day to day functioning of the clinic?

1. _____

2. _____

3. _____

Q402 Please list three most important suggestions you would like to make in order to improve the quality of services at the clinic?

1. _____

2. _____

3. _____

INTERVIEWERS OBSERVATION

Signature of the interviewer _____