



HEALTH PROBLEMS FACED BY WOMEN IN INDIA

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Abstract:

This paper presents the health problems faced by women in India. A simple random sample of 100 women in various fields of women in Guntur district. Researcher prepared 30 items as questionnaire. The reliability of test retest method is 0.79. The test is valid. The internal consistency of mean, SD, 't' values were calculated. The study revealed that there would be no significant difference in the health problems faced by rural and urban women. Hence the study also revealed that there would be significant difference in the health problems faced by below SSC and Below SSC qualification women. Hence the hypothesis is rejected.

Key Words: Women, Health and Problem

India is one of the few countries in the world where women and men have nearly the same life expectancy at birth. The fact that the typical female advantage in life expectancy is not seen in India suggests there are systematic problems with women's health. Indian women have high mortality rates, particularly during childhood and in their reproductive years.

The health of Indian women is intrinsically linked to their status in society. Research on women's status has found that the contributions Indian women make to families often are overlooked, and instead they are viewed as economic burdens. There is a strong son preference in India, as sons are expected to care for parents as they age. This son preference, along with high dowry costs for daughters, sometimes results in the mistreatment of daughters. Further, Indian women have low levels of both education and formal labor force participation.

Currently, women in India face a multitude of health problems, which ultimately affect the aggregate economy's output. Addressing the gender, class or ethnic disparities that exist in healthcare and improving the health outcomes can contribute to economic gain through the creation of quality human capital and increased levels of savings and investment.

Malnutrition

Nutrition plays a major role in an individual's overall health, psychological and physical health status is often dramatically impacted by the presence of malnutrition.

India has one of the highest rates of malnourished women among developing countries. A 2012 study by Tarozzi have found the nutritional intake of early adolescents to be approximately equal. However, it is seen that the rate of malnutrition increases for women as they enter adulthood

Lack of maternal health

The lack of maternal health contributes to the economic disparities of mothers and their children. Poor maternal health not only affects a child's health in adverse ways but also decreases a woman's ability to participate in economic activities. Therefore, national health programs such as the National Rural Health Mission (NRHM) and the Family Welfare Program have been created to address the maternal health care needs of women across India. Although India has witnessed dramatic growth over the last two decades, maternal mortality still remains high as in comparison to many developing nations.

India contributes to nearly 20 percent of all maternal deaths worldwide between 1992 and 2006. The primary reasons for the high levels of maternal mortality are directly related to disparities of economic conditions and cultural constraints limiting access to care.

NEED OF THE STUDY:

Women today are more capable, independent and liberated than those of the previous era. They have redefined gender roles, claimed more power and freedom for themselves and proved their potential to the fullest. However, in the process of fighting for equality and carving a niche for themselves, it's usually their health that takes a toll on them.

Women need more high-quality nutrients when they are pregnant or nursing; however in some areas of India women typically eat last and least. More than half of all Indian women develop anemia due to lack of essential nutrients . In fact, nearly 22,000 people, mainly pregnant women, die every year from severe anemia. This lack of nutrition is transferred to their children who have impaired physical and mental development. Women who are breastfeeding girls typically nurse the female child two months less than male children. The National Family Health Survey states that optimal breastfeeding prevents many dangers of malnutrition. The rate of breastfeeding within one hour of birth is only 25 percent in India. New mothers also lack access to adequate care during their pregnancies, during delivery and postnatal care . CARE India focuses on these vulnerable marginalized women and girls to reduce poverty, improve lives and create empowered women. During my six-month assignment with CARE India, I worked with colleagues to revise the Advocacy Program Strategy in regards to the Right to Education, Food Security, Disaster Management and Sexual, Reproductive & Maternal Health. Marginalized women are defined as those from scheduled tribes, scheduled castes, minorities, urban poor, single women and internally displaced women.

Objectives of the Study

1. To find out the health problems faced by women in India
2. To find out the influence of the following variables on health problems faced by women in India
 - Locality : Rural / Urban
 - Educational back ground : above SSC / below SSC
 - Parental Income: above 1 lakh / Below 1 lakh

Hypotheses of The Study

1. There would be no significant difference in the health problem faced by rural and urban women.
2. There would be no significant difference in the health problem faced above ssc and below SSC qualification of women.
3. There would be no significant difference in the health problem faced by women with respect to parental income.

Scope of the Study

The scope of the present study is covers the 100 womens in Guntur district.

The study also covers the variables like Locality, qualification , parental income

Delimitation of The Study

- The study is limited to 100 s in Guntur district only

Method of Investigation

Normative survey method is used in the present study.

Sample of the study

- A random sample of 100 s in Guntur district only.

Tool of the study:

Tool is prepared by me with the help of educational experts, books, journals

Statistical techniques is used:

Mean, SD, % of mean and 't' value were calculated.

Data Analysis:

Objectives-1: health problems faced by women in India.

Table 1**Table showing the Mean, SD, % of mean of whole sample**

Total	Mean	S.D	% of mean	1/5 th of mean
100	16.37	2.480	77.90	3.275

Hypothesis – 1

There would be no significant difference in the health problem faced by rural and urban women.

Table - 2 Table showing the Mean, SD, and ‘t’ value of rural and urban women.

Variable	N	Mean	SD	S.Ed	‘t’ value
Rural	50	15.333	2.01	5.78	0.121NS
Urban	50	16.032	0.563		

NS- Not significant at 0.05 level

Hypothesis – 2

There would be no significant difference in the health problem faced above SSC and below SSC qualification of women.

Table - 3 Table showing the Mean, SD, ‘t’ values of educational qualification of women

Variable	N	Mean	SD	S.Ed	‘t’ value
above SSC	50	20.04	5.24	1.29	3.658*
below SSC	50	15.32	7.46		

* Significant at 0.05 level

Hypothesis – 3

There would be no significant difference in the health problem faced by women with respect to parental income.

Table - 4 Table showing the Mean, SD, 't' value of parental incomes of women

Variable	N	Mean	SD	S.Ed	't' value
Above 1 lakh	40	18.9	4.04	1.42	1.049NS
Below 1 lakh	60	17.467	9.90		

NS- Not significant at 0.05 level

Findings:

- There would be no significant difference in the health problems faced by rural and urban women. Hence the hypothesis is accepted.
- There would be significant difference in the health problems faced by above SSC and Below SSC qualification women. Hence the hypothesis is rejected.
- There would be no significant difference in the health problems faced by women with respect to parents income. Hence the hypothesis is accepted

Conclusion:

Women's health refers to the branch of medicine that focuses on the treatment and diagnosis of diseases and conditions that affect a woman's physical and emotional well-being.

Health is an important factor that contributes to human wellbeing and economic growth.

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