

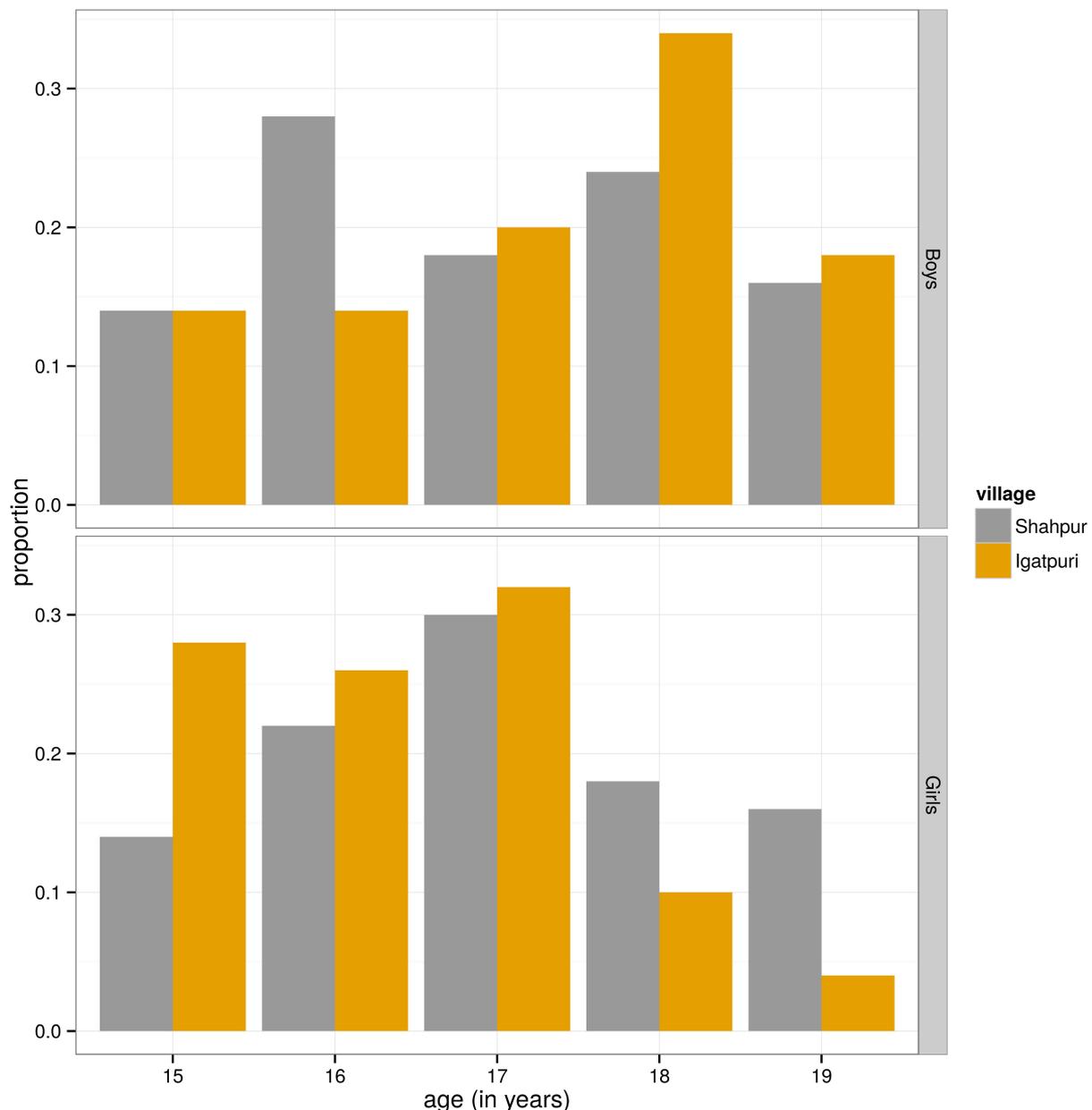
Analysis report: mHealth survey data on unmarried adolescents

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General description of the respondents:

The respondents were unmarried adolescents (50 boys and 50 girls each from two areas, Shahpur and Igatpuri) in the age group of 15-19 years (Figure 1).

Figure 1: Age distribution of mHealth survey participants by area/village and sex



Education status:

The proportions of boys and girls who never attended school were very low (4% boys and 4% girls from Igatpuri and 2% girls from Shahpur). 46% boys and 48% girls from Shahpur and 54% boys and 52% girls from Igatpuri had secondary education and the proportion of boys and girls who did not have any education was 4% each from Igatpuri, and 0% from Shahpur. About 36% adolescents

had higher secondary education from both areas (Figure 2).

Figure 2: Education level of mHealth survey participants by area/village and sex

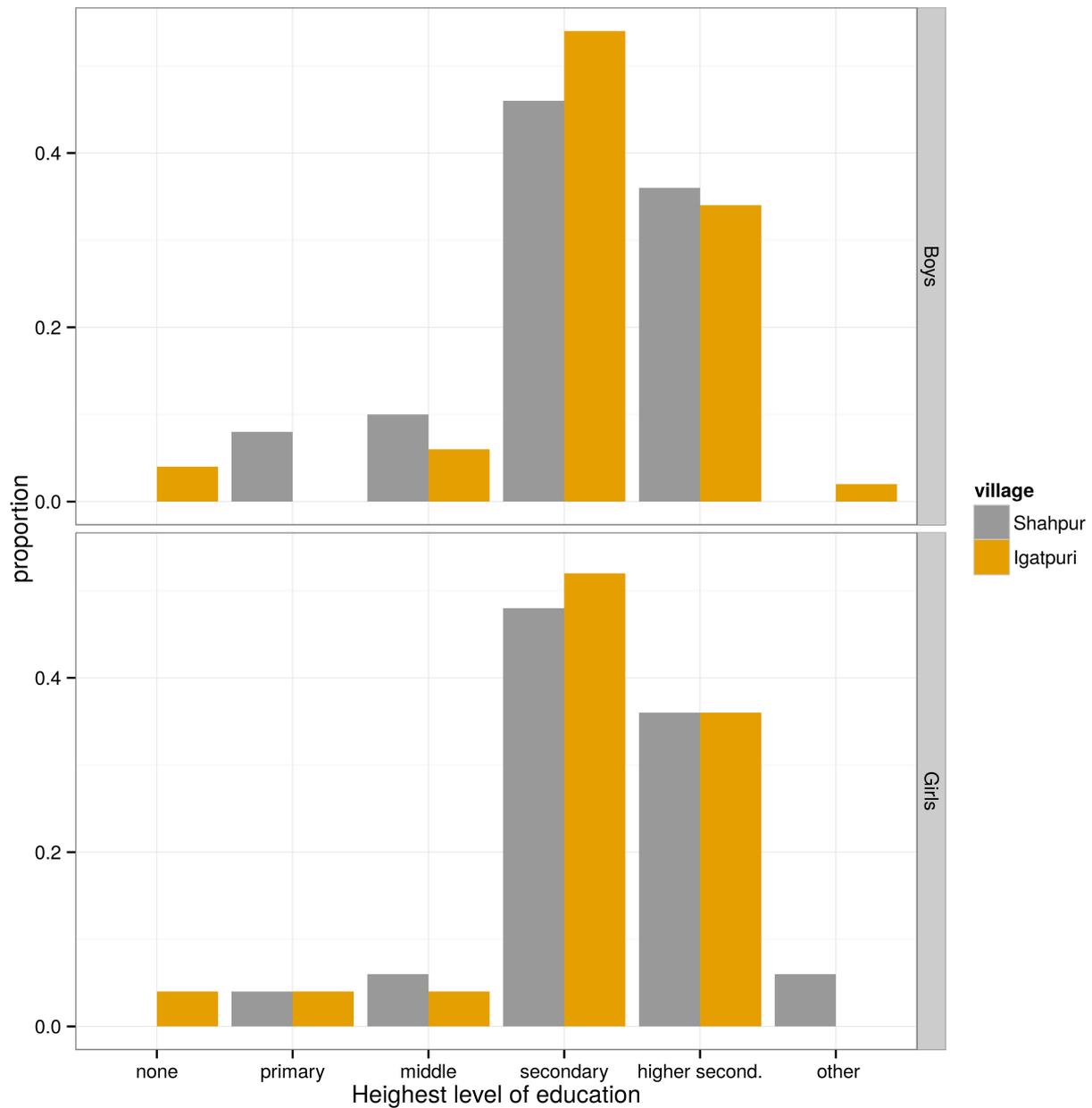


Table 1: Percentages of boys and girls according to the education status who could read and write

Sex	None			Primary			Middle			Secondary			Higher secondary			Other		
	n	read	write	n	read	write	n	read	write	n	read	write	n	read	write	n	read	write
Boys	2	0	0	4	50	75	8	88	100	50	100	100	35	100	100	1	100	100
Girls	2	0	0	4	25	25	5	100	100	50	100	100	36	97	97	3	100	100
All	4	0	0	8	38	50	13	92	100	100	100	100	71	98	98	4	100	100

All those who had secondary or higher education could read and write while this was not the case among those with education lower than secondary (Table 1). Currently 68% boys and 80% girls

were attending school (these percentages were similar between the two areas) and 97% boys and 93% girls were attending schools which were meant for both boys and girls.

Table 2: Number of phones by village

Village	Reported number of phones							Total
	0	1	2	3	4	5	6	
Shahpur	17	32	29	11	6	3	2	100
Igatpuri	7	37	34	17	3	2	0	100
Total	24	69	63	28	9	5	2	200

17% from Shahpur and 7% from Igatpuri did not have any phone and the remaining 83% from Shahpur and 93% Igatpuri had at least one phone (Table 2). These percentages are comparable to those observed among adults. 4% respondents from Shahpur reported to having land line phones (none from Igatpuri). Key pad phones were still the most common (87% from Shahpur and 89% from Igatpuri). However this percentages were lower (about 10%) compared to those reported by adults. Smart phones (39% and 37% in Shahpur and Igatpuri, respectively) were not as uncommon as it was observed in adult survey. Girls reported more of having key pad phones compared to boys and the opposite was true for smart phones.

The summary of the monthly phone bill (in INR) is as follows.

Village	Sex	N	Range (min.,max.)	(Q1, Q3)	Q2	Mean
Shahpur	Boys	38	(9, 550)	(42, 100)	75	96
	Girls	45	(20, 300)	(50, 100)	60	91
	Both	83	(9, 550)	(50, 100)	75	94
Igatpuri	Boys	47	(30, 1000)	(55, 175)	100	154
	Girls	46	(50, 5000)	(100, 200)	100	253
	Both	93	(30, 5000)	(60, 200)	100	203

The figures from Igatpuri are too high and data coding problem is possible (extra zero). Three records from Igatpuri had phone bills above 600 INR (800, 1000 and 5000 INR).

Summary by keeping observations which are ≤ 600 (three observations from Igatpuri were deleted).

Village	Sex	N	Range (min.,max.)	(Q1, Q3)	Q2	Mean
Shahpur	Boys	38	(9, 550)	(42, 100)	75	96
	Girls	45	(20, 300)	(50, 100)	60	91
	Both	83	(9, 550)	(50, 100)	75	94
Igatpuri	Boys	45	(30, 500)	(50, 130)	100	121
	Girls	45	(50, 600)	(100, 200)	100	148
	Both	90	(30, 600)	(60, 187)	100	134

Awareness about a toll free service and its use:

Out of those who had at least one phone at home, about 10% (8 out of 82) from Shahpur and 13% (12 out of 93) from Igatpuri were aware of any toll free number in their region, and only 2 out of these 20 (who were aware of a toll free service) had tried to contact the service. The services

provided by the toll free numbers were health (12 out of 20), agriculture (5 out of 20), did not know (1 out of 20) and no response from one respondent.

There was a common response “Do not know” to a question about awareness of a call centre for family planning. An idea of having a facility of a toll free call centre for health counselling for youngsters was considered good by 77% adolescents of Shahpur and 90% of Igatpuri. The remaining did not respond. 73% from Shahpur and 81% from Igatpuri youngsters would call up such a facility of a call centre for health issues or changes occurring in one's body.

Use and perceptions of health services:

There was a set of questions regarding visit to a doctor in last 12 months and the observations and feelings of the respondents during their visits. The data are summarised in the following table.

Yes(%)	Shahpur		Igatpuri	
	Boys (n=50)	Girls (n=50)	Boys (n=50)	Girls (n=50)
Visited a doctor during the last 12 months for any reason	36	46	62	68
At this facility				
Saw any posters/brochures on health and hygiene	89	52	77	82
Saw any posters/brochures on family planning	67	74	71	50
Felt comfortable enough to ask questions	67	17	81	59
Adequate answers to the questions asked during the consultation	72	22	81	79
Alone with the doctor	61	22	68	6

Sources of information on, and knowledge of reproductive health:

For girls, the most important of sources of information on growth related issues were school teacher and mother, while for boys, they were school teacher and friend. 22% of boys from Shahpur could not list any source.

Table 3: The most important source of information on growth related issues (proportions, %, are given)

Source	Shahpur		Igatpuri	
	Boys	Girls	Boys	Girls
School teacher	58	70	70	20
Mother	0	22	2	54
Father	0	0	2	0
Sister	2	0	0	2
Friends	14	0	26	10
Doctor/nurse/ANM	0	0	0	2
Books/magazine	4	0	0	0
Other	0	2	0	4
Cannot say	22	6	0	8

To find out whether the schools had classes on puberty, on sexual and reproductive systems and on relationships between boys and girls, the respondents were asked: “Did you ever attend school classes on any of these topics?” This question is relevant only for those who were at school after the

age of ten years, in other words those who left school after the age of 10 years or are still at school (the age-group of respondents is 15-19 years). A total of 10 respondents had left school before the age of 10 years. Out of 200 respondents, 12 answered that they had never attended school. When this was cross-validated with the previous direct questions on ever attended school and the highest level of education, it was found that only 10 out of these 12 had education level from primary and higher and 2 had never attended school. The following table was created by keeping only those whose response was different from never attended school and who left school after the age of 10 years.

Table 4: Proportions according to the education on sexual and reproductive health at school.

Education on sexual health at school	Shahpur		Igatpuri	
	Boys (n=44)	Girls (n=47)	Boys (n=46)	Girls (n=46)
Yes	57	87	35	46
No	16	11	52	50
Not sure	27	2	13	4

Too much variation is observed among the respondents in Table 4 and hence, it is inconclusive whether there was education on sexual and reproductive health at school.

Statements about sex and reproduction:

Table 5 reveals that the knowledge of sex and reproduction is very poor among the young respondents.

Table 5: Proportions (%) of responses to two statements about sex and reproduction by sex and area

State ment	Shapurh (%)						Igatpuri (%)					
	Boys			Girls			Boys			Girls		
	Yes	No	DK	Yes	No	DK	Yes	No	DK	Yes	No	DK
1	28	24	48	6	10	84	14	14	72	28	14	58
2	50	20	30	0	12	88	34	2	64	10	4	86

1: A woman can get pregnant on the very first time that she has sexual intercourse.

2: Masturbation causes weakness in the body.

Most of the respondents wanted to have children and the ideal number of children were two (1 boy and 1 girl).

Responses to the question “How easy or difficult it would be for you to visit a doctor/nurse/health worker if you have some intimate problem?” varied between boys and girls and also between two areas. 46% boys from Shahpur said it would be easy to visit a doctor for intimate problems as against 70% boys from Igatpuri. The percentages of girls who said it would be easy to visit a doctor for some intimate problem were 54 and 18 from Shahpur and Igatpuri, respectively. The percentages of boys and girls from Shapur who thought that it would be difficult to visit a doctor was the same (32%), and these percentages were 20 and 78 for Igatpuri. The rest could not say either way.

Instead of directly asking about the respondent's intimate relationship, a question was framed about his/her friend's intimate relationship. The responses were as follows.

		Many	Some	A few	None	Not sure	Missing
Shahpur	Boys	4	6	16	44	28	2
	Girls	0	2	0	58	38	2
Igatpuri	Boys	2	2	6	56	32	2
	Girls	0	4	6	66	22	2
All		2	4	7	56	30	2

Overall 30% responded that they were not sure of any friends having intimate relationship while 56% said none of their friends had any intimate relationship. Total 13% responses were either many, some or a few.

Knowledge and ever use of contraceptive methods:

Knowledge of condom was present in only about 50% of the respondent boys and the place or person from where to obtain it was even lower (34% in Shahpur and 24% in Igatpuri) while the knowledge of condom was very little among girls (6% and 8%). The knowledge of contraceptive pills had the highest proportion among other contraceptions in girls (38% and 54%), however the place or person from where to obtain was poor. There is good chance that injection is confused with the injection which is commonly used during illnesses (by looking at the proportions from Igatpuri) who knew about injection (Table 6).

Table 6: Knowledge of various contraceptive methods by sex and area (percentages are given).

		Pills		Injection		Condom		Emergency pills		Withdrawal	Safe method
		I	II	I	II	I	II	I	II	I	I
Shahpur	Boys	66	78	92	94	50	66	86	80	88	88
	Girls	62	84	92	98	90	98	100	100	100	100
Igatpuri	Boys	52	80	62	88	48	76	78	98	94	90
	Girls	46	68	84	92	94	92	90	88	98	94

I: No knowledge

II: Do not know where to obtain

Of other methods of contraceptions, the most common method that respondents had heard about was female sterilisation. When asked about the most suitable method for youngsters, girls from Shahpur and boys and girls from Igatpuri mentioned female sterilisation or do not know. Responses of boys from Shahpur were do not know, condom, male sterilisation and Cu-T. About the use of contraceptions by others, only 56% girls from Shahpur had heard about female sterilisation being used by others and 26% boys from Shahpur had heard about the use of condom by others. Most of the respondents were not aware of any methods used by others.

Knowledge of HIV/AIDS and sexually transmitted diseases:

The proportions of (boys, girls) from Shahpur and Igatpuri who had heard about HIV or AIDS were (66%, 46%), and (60%, 50%), respectively. When asked about hearing of any other STD, these proportions were (36%, 32%) and (56%, 6%), respectively in Shahpur and Igatpuri.

The treatment for STD would be available from the government hospitals or private clinic according to most of the respondents. When asked about symptoms or signs of STD in past 12 months, most of respondents denied experiencing any of the listed symptoms. The list included

symptoms for boys - discharge from penis, pain during urination, ulcers/sores in genital area, nightfall or wet dreams, none of these and any other; and for girls - vaginal discharge/white discharge, pain during urination, ulcers/sores in genital area, itching in the genital area, increased frequency of urination, leakage of urine, none of these and any other (Table 7).

Since most of the respondents did not experience any of the problems, they did not have a need to discuss with anybody.

Table 7: Awareness of signs or symptoms of sexually transmitted diseases in both men and women. (Responses: aware, not aware, can not say)

Signs	Awareness (%)	Shahpur		Igatpuri	
		Boys	Girls	Boys	Girls
Foul smelling discharge from sexual organs	Aware	12	16	10	12
	Not aware	84	82	8	44
Pain during urinating	Aware	12	16	16	16
	Not aware	80	82	4	46
Boils in legs or arms	Aware	6	12	10	2
	Not aware	92	84	6	52
Ulcers/sores in genital areas	Aware	10	4	6	2
	Not aware	88	92	4	46
Red, bloody eyes	Aware	6	14	8	4
	Not aware	92	82	4	44
For women, acute lower abdominal pain	Aware	8	28	8	24
	Not aware	90	70	6	42
For women, thick, curd-like discharge, Itching	Aware	4	18	8	12
	Not aware	94	78	6	42
For women, soreness of the vulva and vaginal area or Painful intercourse	Aware	6	10	6	4
	Not aware	92	86	6	46

Condom/nirodh and general contraception knowledge and attitudes:

When asked whether the respondent had seen condom, 40% and 56% boys from Shahpur and Igatpuri, respectively answered positively while 8% and 2% girls, respectively gave positive answer. The percentages of knowing someone who had used condom was lower; 24% and 22% boys from Shahpur and Igatpuri and 0 among girls (Table 8). Girls did not seem to have any opinion about condoms but they did not know condom as a contraception either as it was clear from earlier results.

Table 8: Respondent's opinions about condoms by sex and area.

Opinions	Agreement	Shahpur (%)		Igatpuri (%)	
		Boys	Girls	Boys	Girls
I	Agree	44	0	48	2
	Disagree	4	20	10	6
II	Agree	4	2	10	0
	Disagree	42	6	40	10
III	Agree	60	0	34	12
	Disagree	10	8	16	4
IV	Agree	44	2	56	2
	Disagree	4	6	8	8
V	Agree	68	0	48	20
	Disagree	12	8	14	0

I: Condoms are an effective method of preventing pregnancy

II: A condom can be used several times

III: It would be too embarrassing for someone like me to buy or obtain condoms

IV: Condoms are an effective way of protecting against sexually transmitted diseases

V: If someone provides information over phone about condom and also on other matter of intimate relationship then I would not be embarrassed to call.

Menstrual health:

The age at menarche differed slightly between the two areas. The median age was 14 years in both areas and the quartile range was (13, 14) in Shahpur and (14, 15) in Igatpuri. The maximum age was 18 and 16 years in Shahpur and Igatpuri, respectively. The minimum age was 12 years in both areas.

Almost 50% of the girls used old cloth and 50% used branded sanitary pads (a small proportion 2 out of 50 girls from Igatpuri used locally prepared pads). The sanitary pads were purchased from a pharmacy or a village shop.

From Shahpur, 80% girls reported that they were told about menses by their mothers and 16% reported to have been told by a health worker and the remaining 4% were informed either by a close relative or a teacher. There was slight difference in Igatpuri; 66% were told by their mothers, 10% by a friend, 10% by no one, and remaining 14% by a friend or a health worker, or did not remember.