

## Level of Awareness of STI among Tribal Women –A Study in Nilgiri District

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### ABSTRACT

**Background:** Sexually transmitted infections are preventable and curable. Nilgiri district is the homeland of many tribal's, but tribal women have very low knowledge in sexually transmitted infections.

**The objective:** The present study is to assess the level of awareness of STI among tribal women in Nilgiris. Another objective of the study is to find out the association between socio-economic characteristics and knowledge belief about STI.

**Methods:** The total population of tribal women is 10367 (as per census report2011) out of which 375 tribal women were selected for the study based on krejice Margon1970.

**Result:** It is significant to note that the awareness level of STI is low. Therefore when compared with the high and medium category low level of awareness is higher with56.5%.

**Conclusion:** STI knowledge was inadequate among tribal women in Nilgiri district, in general, the studies reported low levels of awareness and knowledge of sexually transmitted Infection.

### 1. Introduction

The word "Tribe" is original from the Latin word "Tribus" meaning "one third". Romans applied the word "tribus" to the 35 people who became a part of Rome before 241 B.C.They also called the conquered Gallic or Germanic populations tribus. Originally a tribe was simply a territorially defined social group. The Romans identified tribe as a political unit that had a distinct name, occupied a common territory, and had a common leadership.

A tribe is a social group, which occupies a definite area. It is characterized by cultural homogeneity and a unifying social organization. The identity and culture of tribes are closely linked to the natural resources and the environment in which they live.

India is a multilingual country. This is evidenced by the fact that one can see a great many differences in cultures, languages, lifestyles among various communities of the nation living in urban, rural, semi-urban and tribal areas. All these communities though they live either side by side to each other or in isolation show varying degrees of socio-economic development. Nilgiris, the hill district of Tamil Nadu is not only a place of a tourist attraction but also a homeland of many tribals. This district is adjacent to the Kerala and Karnataka states. In this district, tribal population speaking different languages such as Toda, Kota, Kattunaicka, Kurumba, Irula, Paniya. The tribal population mingles and interacts with the other tribal and non-tribal groups through the medium of Tamil. The competence in Tamil comes to the tribal population due to their frequent and essential communication with Tamils, in situations other than their family context. India possesses the second largest population in the world. Of the 104 million total population, the scheduled tribal people constitute 8.6%. The Nilgiris district has a population of 735,394 people according to the 2011 census. Of this, the scheduled tribe population is 20874 which comprises of 10507 males and 10367 females.

Though in a village more than one tribal community is found, they usually reside in separate settlements. These settlements are generally located in thick forest areas and in isolation from the non-tribal societies. Most of the tribal earn their wages by employing themselves in different kinds of labor. Since their childhood, the tribal children contribution to their parents either indirectly by looking after the younger ones of the family or directly by associating with their parents in the various occupational activities. Poverty, lack of education, domination by upper-class society is some of the factors contributing to their existing backwardness. In the vision of non-tribals, the tribals are normally considered as 'primitive people', ethnic minorities' and 'disadvantaged societies' (Kundu, 1985).

### 2. The object of the study

- To analysis the socioeconomic background among tribal women
- To analysis the awareness level of sexually transmitted infection among tribal women

### 3. Methodology

The primary data was collected by using a questionnaire, the Nilgiri district consist of six tribal communities. They are today, Kota, Irula, Karumba, paniya, kadunayakans. The total population of tribal women is 10367 (as per census report2011) out of which 375 tribal women were selected for the study based on krejice Margon1970. The secondary data collected from articles, journal, book, newspaper, and ect.,

### 4. Socioeconomic background

Any individual should analyze along with the socio-economic background. The age, marital status, educational qualification, occupation, income and family member's, family type, head of the family, age at marriage, the birth of first child year influence of the person at various levels to lead a life in

society. Therefore the socio-economic background studies as follows

**Table 1**

S. No	Variable	Category	Percentage
1	Age	19-26	24.8
		28-36	30.4
		37-45	44.8
2	Marital Status	Married	88.0
		Widow	10.4
		Divorce	1.6
3	Education Qualification	Illiterate	23.7
		SSLC	55.5
		HSC	12.3
		UG	6.1
		Other	2.4
4	Occupation	House Wife	28.8
		Cooli	63.5
		Government Job	2.4
		Private Job	1.3
		Others	4.0
5	Income	1000-5000	69.3
		5001-10000	25.6
		10001-15000	4.0
		15001-20000	.3
		Above20000	.8
6	Family type	Joint Family	28.3
		Nuclear Family	71.7
7	Number of family	0-3	41.9
		4-6	55.2
		7-9	2.9
8	Head of family	Husband	77.9
		Father-in-law	3.2
		Mother-in law	2.7
		Respondent	16.2
9	Age at Marriage	10-15	8.3
		16-20	58.1
		21-25	28.8
		26-30	3.5
		31-35	1.1
		Above35	.3
10	Birth of first child	Not child	13.1
		10-15	1.6
		16-20	38.1
		21-25	39.2
		26-30	6.4
		31-35	1.3
		Above35	.3

The table 1 show that majority of the respondents are in the age group of 37-40 years. Age is a significant factor contributing to knowledge exposure etc to be a person. The majority of the respondents were married. 55.5 % of the respondents are educated up to SSLC and 63.5% of the respondents are cooli. The educational qualification factor does not affect marital status and occupation. Majority of the respondents having the income between 1000-5000. 77.1 percentages of the respondents are having a nuclear family; the family member is an important factor to lead to do their job future responsibility. 55.2 % of the respondents have 4-6 family members. 77.9 % of the respondents have family head is husband. More than half of the respondents got married at the age of 16-20 and 39.2 % of the respondents got the first baby at the age of 21-25. Age at marriage and first baby born age of the mother is important to factor contribute to reproductive health issues.

**5. Awareness of sexually transmitted infection**

Sexually transmitted infections (STIs) are those diseases that are contracted mainly through sexual intercourse. Include curable ones like gonorrhea, syphilis, and Chlamydia. Therefore the level of awareness as follows

**Table 2 Level of awareness of the respondents**

S. No	Score	Level of respondents	No of the Respondents	Percentage
1	<98	High	104	27.7
2	98-86	Medium	59	15.7
3	>86	Low	212	56.6
		Total	375	100

The number of sample respondents in a low level of awareness group is higher 212(56.5) then the high and medium category.

## 6. Knowledge and belief about STI

Sexually transmitted infections (STIs) are acquired every day worldwide. STIs present a major burden of disease and negatively affect people's well-being across the globe.

Knowledge and belief STI is an essential and dimension of awareness. The score for the six variables in the dimension of Knowledge and belief about STI is present table 3

Table 3

S. No	Variable	Score obtained	Total score	Percentage
1	When the medical personal treats STI infected persons, they will get STIs	1029	1875	54.88
2	Having contact without condoms will lead to STI.	1249	1875	66.61
3	Unsafe behavior leads to STI infection	1291	1875	68.85
4	A person who has STI should be cared with compassion in the hospital.	<b>1297</b>	1875	<b>69.17</b>
5	STIs will infect people because of illegal contacts	1293	1875	68.96
6	Maintaining social relationship with STI infected person will not transmit infection.	1276	1875	68.05

Table 3 show that knowledge and belief about STIs are significant among the respondents as all the variable in the dimension have scored .among the statement that a person who has STIs should care with compassion in the hospital score of 1297 (69.17) followed by STIs will infect people because of illegal contact score1293(68.96). The lowest score when the medical personal treats STI infected persons, they will get STIs 1029(54.88).

The sample of the respondents has very low-level awareness. To the attention of state government and ministry of tribal welfare department to include the reproductive health awareness programme and special health check-up among tribal women.

## 7. Conclusion

STI knowledge was inadequate among tribal women in Nilgiri district, in general, the studies reported low levels of awareness and knowledge of sexually transmitted Infection. The present study reveals that the awareness of STIs was more common among illiterate tribal women and less standard of living index. The tribal women were living with a very poor standard of health, poverty, less educated, unemployment, lack of sanitation and hygiene, inadequate health care facilities. The participant's belief system, the influence of family, friends, and partners were important factors that motivated the health-seeking behavior of women. Therefore more information is required in tribal areas through mass media.

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