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## **DECLARATION**

I, Yelam Priyambada Devi bearing Registration No. Ph.D/1633/2011 dated 20.09 2011, hereby declare that the subject matter of the thesis entitled *Reproductive Health of Women in Manipur: A Sociological Study* is the record of work done by me and that the contents of this thesis did not form the basis for award of any degree to me or to anybody else to the best of my knowledge. The thesis has not been submitted in any other University/Institute.

Place:

Date:

Yelam Priyambada Devi

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#### Preface

Prior to the Cairo Conference in 1994 and Beyond Beijing in 1995, health of women in general and reproductive health in particular remained largely an unexplored area owing to the low priority attached to it. In India different studies have confirmed that the achievement of good sexual and reproductive health may be inhibited by structural factors such as poverty and malnutrition, early marriage and inadequate educational and health systems. Likewise in a typical patriarchal setting as in Manipur, in spite of the several attempts by the government to uplift the status of women through different projects seems not reaching the expected outcome as the society and the culture with their unscientific beliefs and rituals are creating an atmosphere that is not encouraging these changes to reach its desired outcome. Hence, the main objectives of this study are to explore the perception of women about their reproductive health, to enquire about the use of contraceptive methods, husband-wife communication on reproduction, to enquire about the status of women reproductive health and to find out the correlation between socio-economic background and reproductive health of women.

The study was organized into a number of chapters each dealing with a particular aspect of the research undertaken. The first chapter is comprised of the introduction, statement of the problem, theoretical framework and review of literature, objectives, methodology, and significance of the study.

The second chapter deals particularly with the study areas. The health services and infrastructures in the state, district and the study areas are highlighted in the chapter.

The third Chapter provided information regarding socio economic background of the respondents, which is here measured in term of their age-group, marital status, religion, type of family, number of family members, language known, educational qualification of the respondents and the father/spouse of the respondents, occupation of the respondents and the father/spouse of the respondents, type of house, household

consumption pattern, cultivated land, quantity of land, type of land ownership, monthly household income.

The fourth Chapter studied the status of health awareness of the respondents with particular reference to reproductive health.

The fifth Chapter focused on the status of reproductive health of the respondents with particular reference to menarche, prenatal and postnatal health behavior, quality family planning services, safe motherhood: prenatal, safe delivery and post natal care, status of prevention and treatment of infertility, status of abortion, status of reproductive tract infections, including sexually transmitted infections and status of harmful social practices related to sexuality and reproduction

The sixth chapter highlights the correlation between socio economic background and reproductive health of the respondents

The seventh chapter shows the major findings and conclusion of the study.

#### Acknowledgements

It gives me great pleasure in expressing my gratitude to all those people who have supported me and contributed in making this thesis possible. First and foremost, I must acknowledge and thank the almighty God for blessing, protecting and guiding me throughout this period. I could not have accomplished this without the faith I have in the almighty.

I express my profound sense of reverence to my supervisor Dr. Rajiya Shahani, for her constant guidance, support, motivation and untiring help during the course of my research.

I am extremely grateful to Late. Professor Gautam Biswas for helping me to get the opportunity to pursue, my long awaited dream.

I express my deepest gratitude to the Head of the Department of Sociology, Assam University, Silchar, Prof. G. Ram for boosting my confidence throughout the course of research. He has always been caring, a source of wisdom and motivation.

I sincerely thank Dr. Sandeep Gupta Assistant Professor, University of Science and Technology, Meghalaya, for his valuable guidance at each and every step while conducting this research work.

Dr. Shukkoor T. Faculty in Sociology, IITRAM, Ahmedabad and Prof Mohammad Shahid, Mulana Azad University also deserve special thanks for their patience to go through my thesis and giving their positive inputs for the study.

I must acknowledge my thanks to my friends and particular to Bishwatosh Sinha, Mwina Brahma being there whenever I needed.

Most importantly, I want to express my grateful gratitude to the respondents of this study who co-operated with me wholeheartedly for which the thesis is what it is.

I would like to thank my family, my parents Yelam Manibabu Singh and Yelam Mema Devi my sisters Y. Sunita Devi, Y. Anita Devi and Y. Prameshwori Devi and brother-in-law Oinam Jawan Singh for supporting me spiritually throughout my work.

Finally, I would like to thank everybody who was important to the successful realisation of the thesis, as well as expressing my apology that I could not mention personally one by one.

## Abbreviations

A.D	Anno Domini
AIDS	Acquired Immune Deficiency Syndrome
ANC	Antenatal Check-up
ASHA	Accredited Social Health Activist
AYUSH	Ayurveda, Yoga & Naturopathy, Unani, Siddha & Homoeopathy
BP	Blood Pressure
CHC	Community Health Centre
DLHS	District Level Household Survey
EPI	Expanded Program on Immunization
FGM/C	Female genital mutilation/ cutting
GOI	Government of India
HAP	Health Awareness Program
HIV	Human Immunodeficiency Virus
HMIS	Health Management Information System
ICDS	Integrated Child Development Service
ICPD	International Conference on Population and Development
JSY	Janani Suraksha Yojana
MDGs	Millennium Development Goals
MMR	Maternal Mortality Rate
MTP	Medical Termination of Pregnancy
NFHS	National Family Health Survey
NGO	Non-Government Organization
NPP	National Population Policy
NRHM	National Rural Health Mission
PHCs	Primary Health Centre's
PHSCs	Primary Health Sub-centre's
RCH	Reproductive and Child Health Program
RIMS	Regional Institute of Medical Sciences, Manipur
RMP	Registered Medical Practitioner

RWUS	Rural Women Upliftment Society
SC	Scheduled Caste
SRH	Sexual and Reproductive Health
SRHR	Sexual and reproductive health and rights
SRS	Sample Registration System
ST	Scheduled Tribe
STI	Sexually Transmitted Disease
TBA	Traditional Birth Attendant
T.B	Tuberculosis
T.V	Television
UHC	Universal Health Coverage
UNDP	United Nations Development Program
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Emergency Fund
WHO	World Health Organization

# **Glossary**

Maibee	Local dais
Mangba	Polluted/untouchable
Meira paibee Shang	Women Organization shed
Meitei	Manipuri
Meiteilon	Manipuri language
Laokhai	Half Acre
Lei Lakpa	A sign of maturity
Oohti	Traditional dish mainly made of pulses, rice with
	baking soda
Pari	Four acres
Phanek	A women wrap round common dress
Sanamahi	The trinity God of the Meitei's
Sangam/marak	One acre
Thagi khongkap lakpa	Monthly menstruation cycle
Yongchak	Tree bean

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