

CHAPTER 2

KNOWLEDGE, ATTITUDE AND PRACTICE (KAP) STUDY ON HEALTH CARE SEEKING BEHAVIOUR

2 HOUSEHOLD SURVEY

2.1 INTRODUCTION

2.1.1 Objectives of the KAP study

The major objectives of the KAP study are

- To analyse utilization patterns of PHC and reproductive health services and health services seeking behaviours
- To examine haemoglobin level of women and to identify contributing factors to their nutrition status.
- To identify social and cultural factors, which have, close relationship to women's status, health and awareness and contributes to women's reproductive health.
- To assess situation of prevalence of anaemia in women

2.1.2 Methodology

(1) Study Area

The study was conducted in the selected rural and urban areas of Damoh and Tikamgarh districts of Madhya Pradesh.

(2) Target Group

Information was collected from the following target groups:

- All ever married women aged 15-49 years in the selected households
- Husbands of the selected currently married women

(3) Research Technique

Structured pre-tested questionnaire was used to gather the required information from the selected respondent.

(4) Proposed Sample Size

The study proposed to cover a sample of 1000 ever-married women in the age group 15-49 years and also husbands of all selected currently married women. Distribution of number of ever-married women aged 15-49 years proposed in each district is summarised in Table 2-1.

Table 2-1: Number of ever-married women proposed by selected districts

Districts	Urban	Rural	Total
Damoh	80	420	500
Tikamgarh	90	410	500
Total	170	830	1,000

(5) Achieved Sample Size

A sample of 1080 ever-married women aged 15-49 years and 976 husbands was covered in two districts under the study. The distribution of number of ever-married women aged 15-49 years and husbands in each selected district is given in Table 2-2.

Table 2-2: Number of ever-married women and husbands covered by selected

Districts	Urban		Rural		Total	
	Ever-Married Women	Husbands	Ever-Married Women	Husbands	Ever-Married Women	Husbands
Damoh	76	65	470	429	546	494
Tikamgarh	95	83	439	399	534	482
Total	171	148	909	828	1,080	976

(6) Sampling Design

All the villages and urban areas selected for the community survey of Damoh and Tikamgarh had served as sampling frame for the selection of the households survey for the health care seeking behaviour. In all 65 communities (59 villages and 6 towns) were covered under the household survey in these two districts. Looking at the population composition of the two districts the sample households in each district differed. In case of Tikamgarh, 15 to 20 households were considered for each village and this was 10 to 15 households in case of Damoh. In case in a village these numbers of ever-married women were not available then the neighbouring village was visited to achieve the sample households. In each village, the socio-economic and the demographic profile of the household served as a sampling frame for selecting households. The required sample was obtained by using systematic random sampling procedure. All ever married women in each selected household was contacted for gathering information. Simultaneously the husbands of the selected currently married women were also interviewed.

(7) Assessment of nutritional level

The study measured the height and weight of children under 5 years of age in order to assess the prevailing nutritional status of children. Also blood samples from each selected women was obtained in order to assess haemoglobin levels. This information is useful for assessing prevalence rates of anaemia among women. Haemoglobin levels were measured in the field at the end of interview using portable equipment called Hemocue that provides test results in less than one minute.

(8) Presentation of report

In line with the objectives of the study, the data gathered has been analysed and the report is presented into six chapters. 2.1 gives background and objectives and methodology of the study. Subsequently, 2.2 discusses the profile of the demographic and socio-economic characteristics of the selected households. Next Chapter viz 2.3, presents the selected background characteristics such as age, marital status, work status, mobility and exposure to mass media of respondents. After this, 2.4, comes which focuses on the number of living children, desire for children, preferred gender. Subsequently, 2.5 details out information on women's access to money, participation in household decision making and, awareness of women about community activities. Next chapter viz 2.7 makes an attempt to understand health-seeking behaviour of respondents. Finally 2.8 presents information on fertility preferences, family planning and Health Seeking Behaviour of Husbands and their opinion about wife's status and nutrition.

2.2 BACKGROUND AND CHARACTERISTICS OF HOUSEHOLD

This chapter presents the profile of the demographic and socio-economic characteristics of the selected households covered in Tikamgarh and Damoh.

2.2.1 Household Composition

Table 2-3 gives the percent distribution of households by religion and caste of head of the household. Majority of the households heads were Hindu in Tikamgarh (94%) as well as Damoh (96%), about 4 percent in Tikamgarh and 3 percent in Damoh were Muslims and the remaining household heads belong to other religion. Overall, 42 percent of household head belonged to other backward caste category, this proportion being 47 percent in Tikamgarh and 38 percent in Damoh. About 26 percent of household heads belonged to scheduled caste in Tikamgarh as well as in Damoh. About 25 percent to 19 percent of household heads in Damoh and Tikamgarh belonged to general caste. Remaining households were reported to be scheduled tribes. Household heads belonging to scheduled caste and tribe and other backward caste were relatively more concentrated in rural areas than urban areas. Whereas, household heads belonging to general caste was relatively more in urban areas as compared to rural areas in both the districts.

Table 2-3: Religion, Caste of the head of the household and Economic Characteristics of the Household

Details	(in percentage)								
	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
Religion (Base: All households)									
Hindu	86.9	95.3	93.9	95.4	95.9	95.8	90.6	95.6	94.8
Muslim	9.5	2.9	4.1	3.1	2.8	2.8	6.7	2.9	3.4
Other	3.6	1.7	2.0	1.5	1.4	1.4	2.7	1.5	1.7
N	84	407	491	65	434	499	149	841	990
Caste (Base: Those households where head of the household is Hindu)									
Scheduled Caste (SC)	19.2	27.1	25.8	21.0	27.2	26.4	20.0	27.1	26.1
Scheduled Tribe (ST)	4.1	9.3	8.5	6.5	10.3	9.8	5.2	9.8	9.2
Other Backward Class (OBC)	39.7	48.2	46.9	37.1	38.5	38.3	38.5	43.2	42.5
General Caste	37	15.5	18.9	35.5	24	25.5	36.3	19.9	22.3

2.2.2 Age-sex distribution of Household Population

Information on De jure members of a selected household was obtained. Overall, the total de jure sample population was 6037 people, 3179 people in Tikamgarh and 2858 people in Damoh. The age distribution of both the districts is typical of high fertility populations, with a higher proportion of the population in the younger than in the older age groups. About two-fifth of the population was below 15 years and about one-twentieth was aged 60 years or older in both the districts. The de jure sex ratio (females per 100 males) was about 879 in Tikamgarh as well as Damoh. (Table2-4)

The survey further reflects the cultural pattern of marrying off daughters at an early age and sending them to live in their in-laws' home. The daughters are much younger than sons as the mean age of daughters is 8.6 years against a mean age of 15.7 years for the sons. Among the children of the head of the household under 10 years of age, the sex ratio favours males (934 females for every 1000 males) in the home. Although girls should outnumber boys at this age, girls probably die at a faster pace because of poorer care and nutrition as well as the practice of aborting female foetuses and killing newborn baby girls. The sex ratio for the sons and daughters in the 10 - 14 year age group decreases to 821 females for every 1000 males; although Indian law prohibits marrying girls before the age of 18, these data appear to support much earlier marriage and sending of daughters to live in their in-laws' home. This pattern of marriage before the legal marriage age is further supported by the fact that 7% of the daughters-in-law in the home are also under 18. The sex ratio for 15-19 year old children decreases further to 743. The sex ratio for grandchildren in the home also favours boys (861 males for 1000 females). The average household size is larger in Tikamgarh than in Damoh (6.4 vs. 5.7). This difference was greater than the urban/rural difference of 6.0 vs. 6.1.

Table 2-4: Age-sex distribution of Household Population

Characteristics	District						Combined			Sex Ratio
	Tikamgarh			Damoh			Male	Female	Total	
	Male	Female	Total	Male	Female	Total				
Age (in years)										
<1	2.8	2.4	2.6	2.3	2.7	2.5	2.6	2.5	2.5	
1-9	25.0	26.9	25.9	24.8	26.3	25.5	24.9	26.6	25.7	934
10-14	11.5	10.3	10.9	11.2	10.9	11.1	11.3	10.6	11.0	821
15-19	10.2	9.1	9.7	10.1	8.0	9.1	10.2	8.6	9.4	743
20-24	8.2	12.2	10.1	9.5	11.9	10.6	8.8	12.1	10.4	
25-29	9.6	9.0	9.3	9.6	9.6	9.6	9.6	9.3	9.5	
30-34	7.3	7.3	7.3	7.8	7.4	7.6	7.5	7.3	7.4	
35-39	6.1	5.7	5.9	6.4	5.3	5.9	6.2	5.5	5.9	
40-44	4.7	4.0	4.3	3.7	4.0	3.8	4.2	4.0	4.1	
45-49	4.3	3.7	4.0	3.9	3.4	3.6	4.1	3.5	3.8	
50-59	4.1	4.7	4.4	6.0	5.9	5.9	5.0	5.3	5.1	
60-69	3.3	2.9	3.1	3.2	2.7	2.9	3.2	2.8	3.0	
70 & above	3.0	1.8	2.4	1.6	1.8	1.7	2.3	1.8	2.1	
N	1,692	1,487	3,179	1,522	1,336	2,858	3,214	2,823	6,037	879
Avg. HH size			6.4			5.7			6.1	

2.2.3 Marital Status

The information on the marital status of all household members was covered. Overall, about 48 percent of the de jure population were reported to be currently married. This proportion was more or less same in Tikamgarh as well as in Damoh. The proportion of currently married was higher for females than for males in both the districts. The practice of gauna is not popular in both the districts as a negligible number of them had reported to be married but gauana not performed. The impact of widowhood is quite limited in both the districts. About 2 percent in Tikamgarh and 3 percent in Damoh reported to be widow/widower. (Table2-5)

Table 2-5: Marital Status of the Household Members

Characteristics	District						Combined		
	Tikamgarh			Damoh			Male	Female	Total
	Male	Female	Total	Male	Female	Total			
Marital Status									
Currently married	46.6	52.5	49.4	43.8	49.7	46.6	45.3	51.2	48.0
Separated/divorced/terminated	0.2	0.1	0.2	0.6	0.1	0.3	0.4	0.1	0.3
Widowed	1.4	2.4	1.9	1.9	4.1	2.9	1.6	3.2	2.4
Never married	13.3	6.5	10.1	16.6	7.1	12.2	14.9	6.8	11.1
Married but no gauna	0.5	0.3	0.4	0.1			0.3	0.1	0.2
Not applicable (<14 children)	37.9	38.3	38.1	37.0	39.0	37.9	37.5	38.6	38.0
N	1,692	1,487	3,179	1,522	1,336	2,858	3,214	2,823	6,037

2.2.4 Educational Attainment

The educational level of household members is an important indicator of social development. The level of educational attainment of household members often affects reproductive behaviour, use of contraceptives, health of children and proper hygienic practices.

Overall, half of the household members were reported to be illiterate, this proportion being relatively high in Tikamgarh (53%) as compared to Damoh (46%). The proportion of illiterate members was relatively high in rural areas as compared to urban areas in both the districts. About 20 percent of household members in Tikamgarh and 25 percent of household members in Damoh reported to be completed middle level. Higher secondary level was completed by about 6 percent of household members in Tikamgarh and 4 percent in Damoh. (Table2-6)

Table 2-6: Education Attainment

(in percentage)

Characteristics	District						Combined		
	Tikamgarh			Damoh			Male	Female	Total
	Male	Female	Total	Male	Female	Total			
Educational Attainment									
Illiterate	42.8	64.4	52.9	35.4	58.5	46.2	39.3	61.6	49.7
Primary (1-4)	10.7	12.1	11.4	15.5	12.7	14.2	13.0	12.4	12.7
Middle (5-8)	22.7	16.5	19.8	27.6	22.3	25.1	25.0	19.2	22.3
Secondary (9-10)	11.5	3.6	7.8	11.0	3.0	7.2	11.3	3.3	7.6
Higher Secondary (11-12)	8.3	2.6	5.6	5.5	1.7	3.7	6.9	2.2	4.7
Undergraduate & Above	3.9	0.8	2.5	5.1	1.8	3.5	4.5	1.3	3.0
N	1,690	1,487	3,177	1,522	1,336	2,858	3,212	2,823	6,035

2.2.5 Occupational Pattern

Table 2-9 indicates that about 17 percent of the household members in Tikamgarh and 10 percent in Damoh had reported 'agriculture' as their main occupation. This proportion was high for males than females in both the districts. 'Agricultural as well as non-agricultural labourer was reported as main occupation by 18 percent of household members in Damoh as against about 9 percent in Tikamgarh. About 20 percent of male members in Damoh and 10 percent in Tikamgarh were reported to be working as labourer as compared to about 16 percent of female members in Damoh and 8 percent in Tikamgarh. Small proportion of members was reported to be involved in 'service', 'small scale business' and petty business (3 to 5% in both the districts).

In Damoh, a relatively high proportion of members reported to be 'student' (20%) as compared to Tikamgarh (18%). This proportion was relatively high for males than females in both the districts. About three percent of members reported to be unemployed in both the districts.

Table 2-7: Occupation of Household Members

(in percentage)

Characteristics	District						Combined		
	Tikamgarh			Damoh			Male	Female	Total
	Male	Female	Total	Male	Female	Total			
Occupation									
Agriculture/farmer	26.4	6.4	17.0	15.9	3.4	10.0	21.4	5.0	13.7
Labour (agri. & non-agri)	9.8	8.0	8.9	20.2	16.3	18.4	14.7	11.9	13.4
Service (govt. & pvt.)	5.6	1.0	3.4	4.5	0.7	2.7	5.0	0.9	3.1
Small scale business	3.3	0.7	2.1	2.7	0.4	1.6	3.0	0.6	1.9
Petty business	2.2	0.1	1.2	3.2	0.7	2.1	2.7	0.4	1.6
Forest dependent	0.2	0.1	0.1	1.8	2.2	2.0	1.0	1.1	1.0
Carpenter	0.2		0.1	0.1		0.1	0.2		0.1
Mason	0.1		0.1	0.1		0.1	0.1		0.1
Barber	0.1	0.1	0.1	0.1		0.1	0.1	0.0	0.1
Washer man		0.1	0.1	0.1	0.1	0.1	0.0	0.1	0.1
Fisherman		0.1	0.1	0.1		0.1	0.1	0.1	0.1
Livestock keeper	0.2		0.1	0.1	0.1	0.1	0.1	0.0	0.1
Student	21.0	15.5	18.5	23.0	15.9	19.7	22.0	15.7	19.0
House wife	0.6	37.6	17.9	0.2	28.0	13.2	0.4	33.0	15.7
Out of school (6-14 yrs.)	4.5	5.6	5.0	3.4	5.7	4.4	4.0	5.7	4.8
Unemployed	3.2	2.2	2.7	3.2	1.6	2.4	3.2	1.9	2.6
Old age/handicapped	1.8	1.9	1.8	1.7	2.0	1.9	1.7	1.9	1.8
Old age/widow pension	0.6	0.7	0.6	0.7	1.2	0.9	0.6	0.9	0.8
Child (<6 yrs.)	19.8	19.5	19.7	18.1	20.4	19.2	19.0	19.9	19.4
Other	0.3	0.1	0.2	0.1	0.1	0.1	0.2	0.1	0.2
Not applicable	0.4	0.2	0.3	0.8	1.0	0.9	0.6	0.6	0.6
N	1,692	1,487	3,179	1,522	1,336	2,858	3,214	2,823	6,037

2.2.6 Annual Income and Last Month Expenditure of household

Information on annual income of household, last month expenditure on medicines and on other health care; also on household debt and possession of below poverty line card was collected from either head or a responsible person of household in both the districts. This information is presented in Table2-6. Table2-6 reveals that about 51 percent of household heads in Damoh reported their annual household income in between Rs.10000 to Rs.20000 as against 46 percent of household's heads reported the same in Tikamgarh. About 43 percent of household's heads in Tikamgarh and 38 percent in Damoh reported a annual income of more than Rs.20,000. Mean annual income of households was worked out as Rs.27,847 for Tikamgarh and Rs.26,929 for Damoh. Mean annual income of households was relatively high in urban areas as compared to rural areas in both the districts.

Table 2-10 further shows that about 56 percent of the household heads in Damoh reported to spend less than Rs.100 last month on medicines as against 43 percent in Tikamgarh. Regarding last month expenditure on medicines, about 4 percent in Tikamgarh and 5 percent in Damoh reported of spending more than Rs.400. Mean last month expenditure on medicines was worked out Rs.500 in Tikamgarh and Rs.389 in Damoh. Average last month expenditure on medicines was relatively high for urban areas (Rs.673.6 in Tikamgarh and Rs. 54.6 in Damoh) as compared to rural areas (Rs.464.2 in Tikamgarh and Rs.366 in Damoh). This indicates that urban households reported to be spending more last month on medicines as compared to rural households in both the districts. Mean last month expenses on health care other than medicines were worked out to be Rs.201 in Tikamgarh and Rs.107 in Damoh. Average last month expenses on other health care were relatively more in urban area than rural areas in both the districts.

A significant proportion of household heads or a responsible person of the household reported to spend Rs.100 or less in last month on health care other than medicines in Damoh (74%) as compared to 61 percent of the household heads in Tikamgarh. About 18 percent of the heads of households in Tikamgarh and 14 percent in Damoh had reported to spend in between Rs.100 to Rs.200 last month on health care other than the medicines. (Table2-6)

About 28 percent of households reported to have any debt in both the districts. A significantly high proportion of households in rural areas reported to have debts as compared to urban households in Tikamgarh as well as Damoh. (Table2-6)

Overall, 38 percent of households of households reported to have below poverty line card. This proportion was as high as 46 percent in Damoh as compared to 30 percent in Tikamgarh. (Table 2-10)

Table 2-8: Annual Income and Last Month Expenditure of household

Details	District						(in percentage)		
	Tikamgarh			Damoh			Combined		
	Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
Annual Income of household (in Rs.) (Base: All households)									
<5000	1.2	1.2	1.2		0.5	0.4	0.7	0.8	0.8
5000-10000	2.4	11.3	9.8	3.1	11.5	10.4	2.7	11.4	10.1
10001-20000	28.9	49.9	46.3	29.2	54.1	50.9	29.1	52.1	48.6
20001-30000	18.1	22.9	22.0	15.4	19.8	19.2	16.9	21.3	20.6
30001+	49.4	14.7	20.6	52.3	14.1	19.0	50.7	14.4	19.8
Mean	45,104	24,328	27,846	41,957	24,678	26,929	43,722	24,508	27,384
Last month expenditure on medicines (in Rs.) (Base: All households)									
<100	29.3	46.3	43.4	58.9	55.5	56.0	42.0	51.1	49.8
100-200	18.7	17.1	17.4	10.7	15.7	15.1	15.3	16.4	16.2
201-300	11.9	5.2	6.3	4.6	3.7	3.8	8.7	4.4	5.1
301-400	13.3	5.9	7.2	5.4	4.1	4.3	9.9	5.0	5.7
401+	5.3	3.7	3.9	1.8	5.1	4.7	3.8	4.4	4.3
Don't know	32.0	26.1	27.1	23.2	19.5	20.0	28.2	22.7	23.5
Mean	674	464	501	555	366	390	622	413	444

Details	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Last month expenditure on other health care (in Rs.) (Base: All households)									
<100	40.3	65.5	60.9	69.1	74.4	73.7	52.8	70.2	67.5
100-200	34.7	14.8	18.4	16.4	13.5	13.8	26.8	14.1	16.1
201-300	4.2	4.8	4.7	3.6	2.2	2.3	3.9	3.4	3.5
301-400	2.8	2.1	2.2	1.8	1.6	1.6	2.4	1.9	1.9
401+	18.1	12.4	13.4	9.1	8.4	8.5	14.2	10.3	10.9
Don't know		0.3	0.2					0.1	0.1
Mean	229.0	194.6	200.8	121.5	104.4	106.6	182.4	146.8	152.2
Whether households have any debt (Base: All respondents)									
Yes	21.4	28.0	26.9	4.6	31.8	28.3	14.1	30.0	27.6
No	78.6	71.7	72.9	93.8	68.0	71.3	85.2	69.8	72.1
Don't know		0.2	0.2	1.5	0.2	0.4	0.7	0.2	0.3
Whether households have below- poverty line card (Base: All respondents)									
Yes	20.2	32.4	30.3	35.4	47.7	46.1	26.8	40.3	38.3
No	79.8	67.3	69.5	64.6	52.1	53.7	73.2	59.5	61.5
Don't know		0.2	0.2		0.2	0.2		0.2	0.2
N	84	407	491	65	434	499	149	841	990

2.2.7 Housing Characteristics

The source of drinking water, lighting, cooking and availability of sanitary facilities are important determinants of the health status of household members, particularly children.

Table 2-11 shows that about 54 percent of the households in Tikamgarh were reported to be collecting drinking water from dug well but only 41 percent of households in Damoh reported the same source for drinking water. Dug well was a major source of drinking water in rural areas of both the districts (61% in Tikamgarh & 44% in Damoh). Over all, Hand pump was also reported as one of the main source of drinking water after dug well, as reported by 29 percent of households in Tikamgarh and 31 percent in Damoh. More or less similar proportion of households in rural as well as urban areas reported to be drinking water from hand pump in both the districts. Piped drinking water was available for about 26 percent of urban households in Tikamgarh and about 12 percent of urban households in Damoh.

In both the districts, most of the households reported to be electrified (about 72% in Tikamgarh & Damoh). A large majority of urban households had electricity as compared to rural households in both the districts. In urban areas of both districts lighting is overwhelmingly provided by electricity (89% in Damoh and 93% in Tikamgarh). However, in rural areas light is provided by electricity in just over two-thirds of households, and kerosene also plays a prominent role in over a quarter.

In both the districts, firewood was the most common fuel used for cooking. Overall, about 79 percent of households used wood, 9 percent in each district used gas and cow dung. Again there were urban-rural differences. A significant proportion of households was using gas for cooking whereas more than four-fifth of the rural households in both the districts was using wood. Cow dung was also reported as fuel for cooking by about 12 percent of households in Damoh as against 6 percent of households in Tikamgarh. (Table 2-9)

Most of the households in both the districts did not have toilet facility. The type of sanitation facility varies with residence. About 90 percent of rural households had no toilet facility at all in both the districts as compared to 37 percent of urban households in Tikamgarh and 42 percent of households in Damoh. About 37 percent to 45 percent of urban households in Tikamgarh as well as Damoh reported to have septic tank as compared to only about 3 percent to 4 percent in rural areas. Single pit latrines was reported by 12 percent of urban households in Tikamgarh and 9 percent in Damoh, this proportion for the rural areas was about 3 percent in both the districts. (Table 2-9)

Overall, about 34 percent of households had reported to have 2 rooms. The corresponding proportion was high in Damoh (39%) than in Tikamgarh (29%). As high as about 30 percent of households reported to have more than 3 rooms in Tikamgarh as compared to about 20 percent in Damoh. This proportion was reportedly high for urban areas as compared to rural areas in both the districts. A marked difference is observed in case of number of persons per room in urban and rural areas. There is no marked difference for the same in case of the two studied districts. While more than 2 persons are accommodated in one room in case of rural areas the same is less than 2 persons for the urban areas (Table 2-9).

Table 2-9: Source of Drinking Water, Lighting, Cooking Fuel and Toilet facility and Persons per room

Housing Characteristics	District						(in percentage)		
	Tikamgarh			Damoh			Combined		
	Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
Main Source of Drinking Water (Base: All households)									
Private tap	26.2	1.5	5.7	12.3	2.3	3.6	20.1	1.9	4.6
Community tap	7.1	1.5	2.4	3.1	6.5	6.0	5.4	4.0	4.2
Hand pump	29.8	28.7	28.9	30.8	31.1	31.0	30.2	30.0	30.0
Tube well	13.1	7.6	8.6	9.2	4.6	5.2	11.4	6.1	6.9
Dug well	23.8	60.7	54.4	21.5	43.8	41.0	22.8	52.0	48.0
River				23.1	9.4	11.0	10.1	4.9	5.7
Other					2.3	2.0		1.2	1.0
Main Source of Lighting (Base: All households)									
Electricity	92.9	68.1	72.3	89.2	69.4	72.0	91.3	68.7	72.1
Kerosene	6.0	29.0	25.1	9.2	27.0	25.0	7.4	27.9	24.8
Gas	1.2	0.2	0.4	1.5	0.2	0.4	1.3	0.2	0.4
Oil					0.2	0.2		0.1	0.1
Candles		2.0	1.6		1.4	1.2		1.7	1.4
None		0.5	0.4		0.2	0.2		0.4	0.3
Other		0.2	0.2		1.6	1.4		1.0	0.8
Main Fuel for Cooking (Base: All households)									
Firewood	36.9	88.7	79.8	41.5	83.2	78.0	38.9	85.9	78.8
Coal	1.2	0.2	0.4		0.7	0.6	0.7	0.5	0.5
Kerosene	10.7	1.2	2.9	4.6	1.2	1.6	8.1	1.2	2.2
Gas	50.0	2.0	10.2	44.6	2.1	7.6	47.7	2.0	8.9
Cow dung	1.2	7.1	6.1	9.2	12.2	12.0	4.7	9.8	9.0
Electricity		0.2	0.2		0.2	0.2		0.2	0.2
Field by-products		0.2	0.2		0.2	0.2		0.2	0.2
Others		0.2	0.2		0.2	0.2		0.2	0.2
Type of Toilet Facility (Base: All households)									
Double Pit	4.8	2.7	3.1	1.5	1.4	1.4	3.4	2.0	2.2
Single Pit	11.9	2.5	4.1	9.2	3.0	3.8	10.7	2.7	3.9
Septic tank	36.9	2.7	8.6	44.6	3.9	9.2	40.3	3.3	8.9
Connected to sewer	8.3	0.5	1.8	3.1	0.2	0.6	6.0	0.4	1.2
Service latrine		0.5	0.4		0.7	0.6		0.6	0.5
Community Latrine	1.2	1.2	1.2		0.2	0.2	0.7	0.7	0.7
No facility	36.9	89.9	80.9	41.5	90.6	84.0	38.9	90.2	82.5
No. of persons per room (Base: All households)									
No room		1.5	1.2		0.5	0.4		1.0	0.8
1 room	10.7	19.9	18.3	20.0	28.8	27.7	14.8	24.5	23.0
2 rooms	16.7	31.2	28.7	36.9	39.2	38.9	25.5	35.3	33.8
3 rooms	32.1	19.2	21.4	6.2	14.1	13.0	20.8	16.5	17.2
More than 3 rooms	40.5	28.3	30.3	36.9	17.5	20.0	38.9	22.7	25.2
No. of persons per room	1.7	2.1	2.0	1.7	2.2	2.1	1.7	2.1	2.1
N	84	407	491	65	434	499	149	841	990

2.2.8 Water Purification

The study collected information on frequency of water purification, method and source of learning the methods from all the selected households. These information are presented in Table 2-10.

Combined in both the districts, about 71 percent of households had reported that they never did anything for the purification of water. This proportion was reported to be high in Tikamgarh (76%) than Damoh (67%). In Tikamgarh, comparatively more rural households (80%) had reported that they did nothing for the purification of water than urban households (56%). This picture got reversed in Damoh. The proportion of households reported to purify water always was relatively high in Damoh (29%) as compared to Tikamgarh (20%). (Table 2-10)

Information on the methods of purifying water was collected from only those households, which reported to be purifying water either always or sometimes. Table 2-10 further indicates that in both the districts, majority of those households which always or sometimes purified water reported to be purifying it through strain by cloth or gauze (90%). The corresponding proportion was relatively high for Damoh (92%) than Tikamgarh (86%). Only about 7 percent of such households reported to use water filter for the purification of water in Tikamgarh as against 5 percent in Damoh. The corresponding proportion was relatively high for urban areas (14% in Tikamgarh & 17% in Damoh) as compared to rural areas (4% in Tikamgarh & 3% in Damoh).

About 69 percent of those households, which either always or sometimes purified water, reported to learn the method of purification in childhood in both the districts. The corresponding proportion was relatively high for the rural areas as compared to urban areas in Tikamgarh and Damoh. About 22 percent of urban households which were doing something for the purification of water had learned it either from radio, television or newspaper or all as against about 5 percent of such rural households reported the same in both the districts. More or less about same proportion of households using any method of purification of water had reportedly learned this from health worker in Tikamgarh (9%) as against Damoh (8%). (Table 2-10)

Table 2-10: Frequency of purification, method and source of learning the methods of purifying the drinking water

Details	District						(in percentage)		
	Tikamgarh			Damoh			Combined		
	Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
Frequency of Purification of Drinking Water (Base: All households)									
Always	32.1	17.2	19.8	26.2	29.3	29.0	29.5	23.4	24.0
Sometimes	11.9	2.7	4.3	1.5	5.1	4.6	7.4	3.9	4.4
Never	56.0	80.1	76.0	72.3	65.7	67.0	63.1	72.7	71.0
N	84	407	491	65	434	499	149	841	990
Method of Purifying Drinking Water (Base: Those households which always or sometimes purify water)									
Strain by Cloth/Gauze	75.7	91.4	86.4	83.3	92.6	92.0	78.2	92.2	90.0
Alum	5.4	1.2	2.5	5.6	1.3	1.8	5.5	1.3	2.1
Water Filter	13.5	3.7	6.8	16.7	3.4	4.8	14.5	3.5	5.6
Boiling				5.6	2.0	2.4	1.8	1.3	1.4
Electric Purifier		1.2	0.8					0.4	0.4
Chlorine		6.2	4.2		1.3	1.2		3.0	2.5
Others	5.4		1.7				3.6		0.7
Source of learning the above methods (Base: Those households which always or sometimes purify water)									
Learned in childhood	59.5	72.8	68.6	66.7	69.1	69.0	61.8	70.4	69.0
Radio, television, newspaper	21.6	4.9	10.2	22.2	4.7	6.6	21.8	4.8	8.1
Anganwadi worker	2.7	4.9	4.2		4.0	3.6	1.8	4.3	3.9
School teacher		2.5	1.7		1.3	1.2		1.7	1.4
Panchayat member					3.4	3.0		2.2	1.8
Other health worker	2.7	12.3	9.3	5.6	8.1	7.8	3.6	9.6	8.4
Other	13.5	2.5	5.9	5.6	9.4	9.0	10.9	7.0	7.7
N	37	81	118	18	149	167	55	230	285

2.2.9 Kitchen 's Position and Condition

Table 2-11 reveals that combined in both the districts, more than two-third of the households did not have a separate room for the kitchen, this proportion being high in Damoh (71%) as compared to Tikamgarh (64%). A significant proportion of households in urban areas of both districts had reported that there was no separate room for the kitchen. But this proportion was comparatively more for rural households in Tikamgarh as well as Damoh.

Information was collected about the position of the kitchen room from those households who had a separate room for kitchen. It is clear from the Table 2-11 that a large majority of households having a separate room for kitchen reported that this room was inside the house in Tikamgarh (75%) as against 90 percent in Damoh. This proportion was relatively high for the urban areas than rural areas in Tikamgarh.

Information about the proper ventilation in the kitchen was collected from all the selected households in both the districts. A glance on Table 2-11 shows that overall, about 40 percent of the households reported to have proper ventilation in the kitchen, the proportion being relatively high for Tikamgarh (42%) as compared to Damoh (37%). The corresponding proportion was significantly high in urban households as compared to rural households in Tikamgarh as well as Damoh.

Table 2-11: Households having separate room for a kitchen, position of this room and facility of proper ventilation in the kitchen

Details	District						(in percentage)		
	Tikamgarh			Damoh			Combined		
	Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
Whether Households have separate room for a kitchen (Base: All households)									
Yes	56.0	32.2	36.3	40.0	27.0	29.0	49.0	29.5	32.0
No	44.0	67.8	63.7	60.0	73.0	71.0	51.0	70.5	68.0
N	84	407	491	65	434	499	149	841	990
Position of this room (Base: All households)									
Inside	87.2	71.0	75.3	88.5	89.7	90.0	87.7	79.8	82.0
Outside	12.8	29.0	24.7	11.5	10.3	11.0	12.3	20.2	18.0
N	47	131	178	26	117	143	73	248	321
Whether Households have proper ventilation in the kitchen (Base: All households)									
Yes	69.0	36.4	42.0	75.4	31.3	37.1	71.8	33.8	39.5
No	31.0	63.6	58.0	24.6	68.7	62.9	28.2	66.2	60.5
N	84	407	491	65	434	499	149	841	990

2.2.10 Household Assets

Table 2-12 contains a number of measures related to the socio-economic status of the household: household ownership of agriculture land and durable goods. The population in these districts maintains its traditional strong tie to the land, and most households own some agricultural land. In Tikamgarh more than a third of urban households and nearly four-fifths of rural households own agricultural land, while the proportions are 26% and 55% in Damoh. This discrepancy in rural land ownership in the two districts (80% vs. 55%) may be explained by a greater tendency to large landholders in Damoh where 28% of male household heads are farmers compared to 50% in Tikamgarh. In Damoh 42% of the male heads of households are labourers who work for other people (agricultural and non-agricultural, but the economy is principally agricultural), compared to only 18% in Tikamgarh. As high as about 52 percent of the households reported to have agricultural land of size 1 acre to 5 acres in Tikamgarh as compared to 35 percent in Damoh. This proportion was relatively high for the rural areas than urban areas in both the districts.

The possession of durable goods is another indicator of a household's socio-economic level, although these goods may also have other benefits. For example, having access to radio or

television may expose household members to innovative ideas; a refrigerator prolongs the wholesomeness of food; and a means of transportation allows greater access to many services outside the local area. (Table 2-12)

Few households own a means of transportation, which can be an important determinant in obtaining timely care in a health emergency. Less than 1% own a car or jeep, while 14% in Tikamgarh and 8% in Damoh own a motorbike or scooter. Bicycles are more widely owned, by 68% of households in Tikamgarh and 47% in Damoh, with urban households enjoying greater ownership of bicycles than rural. In rural areas animal-drawn carts and tractors are used both for transportation and for agricultural purposes; 20% of rural households in Tikamgarh and 11% in Damoh own carts, while 5% of rural households in each district own the more expensive tractors.

The low level of appliance ownership reflects the poverty of this region of India. Among common household appliances, an electric fan is the most frequently owned. Nearly half of all households in Tikamgarh have one, compared to 39% in Damoh. Almost no households own a telephone, rice- or flourmill, generator or refrigerator. More than a quarter of Tikamgarh households and a fifth in Damoh own a radio. Surprisingly, it is more common to own a television than a radio: a quarter of rural households and three-quarters of urban households own a TV. (This is also true for the state as a whole.)

Table 2-12: Household Ownership of Land and Durable Goods

Details	District						(in percentage) Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Agricultural Land (Base: All households)									
No land	64.3	21.8	29.0	74.2	45.2	49.0	68.7	33.8	39.0
<1 Acres		3.2	2.6		0.7	0.6		1.9	1.6
1-5 Acres	26.2	57.5	52.1	12.1	38.9	35.0	20.0	47.9	44.0
6+ Acres	9.5	17.6	16.2	13.6	15.0	15.0	11.3	16.4	16.1
Durable Goods (Base: All households)									
Car/ Jeep	1.2	0.5	0.6				0.7	0.2	0.3
Motorbike/Scooter	32.1	9.8	13.6	21.5	5.5	7.6	27.5	7.6	10.6
Bicycle	75.0	66.3	67.8	75.4	42.6	46.9	75.2	54.1	57.3
Cart drawn by animals	1.2	20.1	16.9	4.6	11.3	10.4	2.7	15.6	13.6
Tractor	2.4	4.9	4.5	0.0	5.1	4.4	1.3	5.0	4.4
Television	81.0	24.6	34.2	66.2	27.0	32.1	74.5	25.8	33.1
Radio	34.5	25.3	26.9	35.4	17.3	19.6	34.9	21.2	23.2
Refrigerator	13.1	1.7	3.7	20.0	2.1	4.4	16.1	1.9	4.0
Electric Fan	90.5	37.6	46.6	66.2	35.0	39.1	79.9	36.3	42.8
Generator		1.0	0.8	12.3	0.9	2.4	5.4	1.0	1.6
Rice mill/ Flourmill	2.4	1.2	1.4		1.2	1.0	1.3	1.2	1.2
Telephone	9.5	0.2	1.8	7.7	3.0	3.6	8.7	1.7	2.7
N	84	407	491	65	434	499	149	841	990

2.2.11 Mortality at Household level

Table 2-13 shows that overall, about 18 percent of households reported at least on death in the household in last five years. This proportion was more or less similar in both the districts. Also, there did not exist a significant rural and urban differential.

About 28 percent to 30 percent of households in Damoh and Tikamgarh where death took place in last five years reported the death of at least one woman in their household. A significant rural and urban differential could be observed in both the districts. In Damoh, 31 percent of those rural households where death took place in last five years had reported the death of woman as compared to only 9 percent in urban areas. Whereas for Tikamgarh, the mortality pattern got reversed, In other words, in Tikamgarh, the proportion of households reporting a death of a woman in last five years was significantly high in urban areas (40%) than rural areas (28%). (Table 2-13)

Most of the women who died were from the older cohort i.e. aged more than 49 years as reported by 52 percent of those households where death of a woman took place in last five years in Tikamgarh (52%) and 47 percent in Damoh. Mean age at death for women was as high as 52 years in Tikamgarh as compared to 47 years in Damoh. In Tikamgarh, the mean age at death was relatively high in rural areas (54 years) than urban areas (47 years). Whereas, in Damoh, the mean age at death was relatively high in urban areas (55 years) than rural areas (46.5 years). Careful interpretation is required, as the bases are small. (Table 2-13)

A small number of households reported the death of women aged 15-49 years in last five years in Tikamgarh (10 Has) and Damoh (13 Has). Of the 10 such households in Tikamgarh, 5 households reported that the reasons for the death were either related to pregnancy or delivery or after delivery. 9 households out of 13 households in Damoh reported the same. (Table 2-13)

Table 2-13: Mortality

Details	District						(in percentage)		
	Tikamgarh			Damoh			Combined		
	Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
Whether anyone die in the household in the last five years (Base: All households)									
Yes	17.9	17.7	17.7	16.9	19.4	19.0	17.4	18.5	18.4
No	82.1	81.8	81.9	83.1	80.4	80.8	82.6	81.1	81.3
Don't know		0.5	0.4		0.2	0.2		0.4	0.3
N	84	407	491	65	434	499	149	841	990
Whether anyone who died was a woman (Base: Those households where death took place in last five years)									
Yes	40.0	27.8	29.9	9.1	31.0	28.4	26.9	29.5	29.1
No	60.0	70.8	69.0	90.9	67.9	70.5	73.1	69.2	69.8
Don't know		1.4	1.1		1.2	1.1		1.3	1.1
N	15	72	87	11	84	95	26	156	182
Age at death of the woman (in years) (Base: Those households where the woman died in last five years)									
15-19		5.0	3.8		11.5	11.1		8.7	7.5
20-24	33.3		7.7		15.4	14.8	28.6	8.7	11.3
25-29		15.0	11.5		3.8	3.7		8.7	7.5
30-34	16.7	10.0	11.5		7.7	7.4	14.3	8.7	9.4
35-39		5.0	3.8		3.8	3.7		4.3	3.8
40-44					7.7	7.4		4.3	3.8
45-49					7.7	7.4		4.3	3.8
50+	50.0	65.0	61.5	100.0	50.0	51.9	57.1	56.5	56.6
Mean	47.3	53.6	52.2	55.0	46.5	46.9	48.4	49.6	49.5
N	6	20	26	1	26	27	7	46	53
Reason for the death of the woman aged 15-49 years (Base: Those households where the woman died aged 15-49 years during the last five years)									
Pregnancy related		14.3	10.0		7.7	7.7		10.0	8.7
Related to labour or delivery	33.3	14.3	20.0		7.7	7.7	33.3	10.0	13.0
After delivery	33.3	14.3	20.0				33.3	5.0	8.7
Others	33.3	57.1	50.0		69.2	69.2	33.3	65.0	60.9
Not Applicable (15-49)					15.4	15.4		10.0	8.7

2.3 BACKGROUND CHARACTERISTICS OF RESPONDENT

This chapter examines the selected background characteristics, which includes age, marital status, work status, mobility and exposure to mass media of primary respondent (ever married women aged 15-49 years).

2.3.1 Current Age

In both the districts about 54 percent of women interviewed were under age 30. This proportion was about 56 percent in the rural areas of both the districts. But for urban areas, about 45 percent

of ever-married women in Tikamgarh and 44 percent in Damoh were reported to be aged below 30 years. The percentage in each age group had increased up to age 20-24 years in both the districts, reflecting the increase in the proportion married in successive age groups. The percentages had declined after age 20-24 years, by which time most women had already married, reflecting the normal pyramidal shape of the age distribution. This age pattern was similar in rural areas. But for urban areas of both the districts, the proportion of ever-married women had increased up to 30-34 years in Tikamgarh and 25-29 years in Damoh. The proportion had declined in subsequent age groups. (Table 2-14)

Table 2-14: Current Age

(in percentage)

Details	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Age (in years) (Base: All Ever-Married women 15-49 years)									
15-19	7.8	8.3	8.2	7.0	6.1	6.2	7.4	7.2	7.2
20-24	14.4	25.9	24.0	16.3	26.3	24.7	15.3	26.1	24.4
25-29	21.1	21.8	21.7	20.9	23.3	22.9	21.0	22.6	22.3
30-34	22.2	18.0	18.7	12.8	18.5	17.6	17.6	18.3	18.1
35-39	13.3	13.3	13.3	17.4	11.5	12.5	15.3	12.4	12.9
40-44	7.8	7.2	7.3	15.1	8.0	9.2	11.4	7.6	8.2
45-49	13.3	5.4	6.7	10.5	6.3	7.0	11.9	5.9	6.9
N	90	444	534	86	460	546	176	904	1,080

2.3.2 Marital Status

Table 2-15 indicates that overall, about 98 percent of ever-married women were reported to be currently married. This proportion was more or less same for Tikamgarh as well as Damoh. Among the rest, most of them were widowed. The impact of widowhood was limited but more felt in urban areas of both the districts. About 3 percent of urban respondents in Tikamgarh and about 5 percent of urban respondents in Damoh were reported to be widowed as against 1 to 2 percent in rural areas.

Table 2-15: Marital Status

(in percentage)

Details	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Marital Status (Base: All Ever-Married women 15-49 years)									
Currently Married	96.7	98.6	98.3	95.3	97.4	97.1	96.0	98.0	97.7
Deserted/Separated		0.7	0.6		0.7	0.5		0.7	0.6
Divorced					0.2	0.2		0.1	0.1
Widowed	3.3	0.7	1.1	4.7	1.7	2.2	4.0	1.2	1.7
N	90	444	534	86	460	546	176	904	1,080

2.3.3 Work Status

Table 2-16 gives details of current working status of respondent and her main occupation. Table 2-16 reveals that overall about 34 percent of respondent reported to be working aside from their housework. The corresponding proportion was high for Damoh (44%) as compared to Tikamgarh (25%). The proportion of currently working ever-married women was as high as 27 percent to 46 percent in rural areas of Tikamgarh and Damoh as compared to 12 percent to 31 percent in urban areas in Tikamgarh and Damoh.

Table 2-16 further reveals that overall 36 percent of currently working ever-married women reported "bidi" rolling or other type of work at home as their main occupation. The corresponding proportion was relatively high for Damoh (about 50%) as compared to Tikamgarh (about 13%). In Tikamgarh, about 46 percent of currently working respondent reported to be working mainly as

labourer. This proportion was about 34 percent in Damoh. About 20 percent of currently working women in Tikamgarh and about 7 percent in Damoh reported 'agricultural worker' as their main occupation. About 6 percent of respondent reported 'small scale merchant' as their main occupation in Tikamgarh but a negligible respondent reported the same in Damoh.

Table 2-16: Work Status

(In percentage)

Details	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Whether currently working aside from housework (Base: All Ever-Married women 15-49 years)									
Yes	12.2	27.3	24.7	31.4	46.3	44.0	21.6	36.9	34.4
No	87.8	72.7	75.3	68.6	53.7	56.0	78.4	63.1	65.6
N	90	444	534	86	460	546	176	904	1,080
Main Occupation (Base(N): Currently working ever-married women 15-49 years)									
Official	25.0	4.6	6.3		2.3	2.0	7.7	3.2	3.6
Agriculture Worker		21.5	19.7		8.3	7.4		13.3	11.9
Individual Merchant		0.8	0.7	7.4	0.5	1.2	5.1	0.6	1.0
Labourer	16.7	48.5	45.8	14.8	36.9	34.4	15.4	41.2	38.6
Domestic Servant	8.3		0.7				2.6		0.3
Small Scale Merchant		6.2	5.6		0.5	0.4		2.6	2.3
Small Scale Entrepreneur		0.8	0.7	7.4	1.4	2.0	5.1	1.2	1.6
Bidi rolling or other piece of work at home	33.3	10.8	12.7	70.4	47.0	49.6	59.0	33.4	36.0
Others	16.7	6.9	7.7		3.2	2.9	5.1	4.6	4.7
N	12	130	142	27	217	244	39	347	386

2.3.4 Mobility

Information on migration pattern of currently working respondent which includes whether respondent migrate for work, time of migration and frequency of migration in each year was collected from currently working ever-married women aged 15-49 years. This information is presented in Table 2-17.

Table 2-17 reveals that overall, about 18 percent of currently working ever-married women had reportedly migrated for work to other places. The corresponding proportion was relatively high for Tikamgarh (23%) as compared to Damoh (16%). Relatively a high proportion of rural respondent was migrated for work to other places in both the districts.

Table 2-17 further shows that overall, slightly more than half of the migrated women reportedly migrated during summer. The corresponding proportion was high in Damoh (about 63%) as compared to Tikamgarh (about 38%). About 38 percent of migrated women reported to be migrated during Rabi in Tikamgarh as against 29 percent in Damoh.

About 47 percent of migrated women reportedly migrated once in each year in Tikamgarh as against about 13 percent of migrated women reported the same in Damoh. About 26 percent of migrated women reportedly migrated twice in each year in Damoh as against about 19 percent of migrated women reported the same in Tikamgarh. About 3 percent to 6 percent of migrated women reported to be migrated four times or more in each year in Damoh as well as Tikamgarh. (Table 2-17)

Table 2-17: Mobility

Details	(in percentage)								
	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
Whether you migrate for work (Base: Those respondents who are currently working)									
Yes		24.6	22.5	7.4	16.6	15.6	5.1	19.6	18.1
No	100.0	75.4	77.5	92.6	83.4	84.4	94.9	80.4	81.9
N	12	130	142	27	217	244	39	347	386
Time of migration (Base: Those respondents who are currently working and migrate)									
During Rabbi (Nov-Mar.)		37.5	37.5	50.0	27.8	28.9	50.0	32.4	32.9
During Summer (Apr.-Jun.)		37.5	37.5	50.0	63.9	63.2	50.0	51.5	51.4
Other		25	25		8.3	7.9		16.2	15.7
Frequency of migration in a year (Base: Those respondents who are currently working and migrate)									
One times		46.9	46.9		13.9	13.2		29.4	28.6
Two times		18.8	18.8		27.8	26.3		23.5	22.9
Three times		3.1	3.1		22.2	21.1		13.2	12.9
Four & more times		9.4	9.4		13.9	13.2		11.8	11.4
It varies from year to year		6.3	6.3		2.8	2.6		4.4	4.3
Don't know		15.6	15.6		2.8	2.6		8.8	8.6
N		32	32	2	36	38	2	68	70

2.3.5 Exposure to Mass Media

This section provides information on exposure of respondents to mass media that includes newspaper/magazine, radio and television; number of hours of reading/listening/watching newspaper/radio/television in a day and channels preferred to listen or watch on radio and television

(1) Exposure to written media (Newspaper/magazine)

Majority of the respondents in both the districts reported that they never read either newspaper or magazine. This proportion was comparatively high in rural areas than urban areas in both the districts. A small proportion of respondents ranging 2 percent in Damoh to 3 percent in Tikamgarh had reported to read newspaper/magazine for one hour in a day. (Table 2-18)

Table 2-18: Exposure to Written Media

Details	(in percentage)								
	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
Frequency of reading newspaper or magazine (in hrs) (Base: All Ever-Married women 15-49 years)									
Never	86.7	97.7	95.9	93.0	97.0	96.3	89.8	97.3	96.1
1	11.1	1.6	3.2	5.8	1.5	2.2	8.5	1.5	2.7
2		0.2	0.2	1.2	0.4	0.5	0.6	0.3	0.4
3	1.1		0.2		0.2	0.2	0.6	0.1	0.2
4+	1.1	0.5	0.6		0.9	0.7	0.6	0.7	0.6
Total	90	444	534	86	460	546	176	904	1,080
Mean	1.5	2.9	2.1	1.2	4.4	3.5	1.4	3.8	2.8

(2) Exposure to Radio

A large majority of respondents had not listened to radio at all in Tikamgarh (88%) as well as Damoh (89%). About 8 percent of respondents in both the districts had listened to radio for one hour in a day. This proportion was relatively high for urban areas (13% in Tikamgarh & 10% in Damoh) as compared to rural areas (7% in Tikamgarh and Damoh). (Table 2-19)

Slightly less than three-fifth of radio listener did so during late morning (9-12AM) in Damoh but only about three-tenth of radio listener reported the same time period in Tikamgarh. About 30

percent of respondent reported to listen radio during evening (between 6-8 PM) in both the districts. The proportion of respondents reported to listen radio during midday (12-1 PM) was about 19 percent in both the districts. (Table 2-19)

About 72 percent of radio listener preferred to listen 'Vivid Bharti' in Damoh as against about 53 percent reported same channel in Tikamgarh. Jabalpur radio station was listened by about 55 percent of respondents in Damoh as compared to 15 percent in Tikamgarh. About 12 percent of respondents in Tikamgarh and about 5 percent in Damoh were reported to listen All India Radio Delhi. (Table 2-19)

Table 2-19: Exposure to Radio

Details	District						(in percentage)		
	Tikamgarh			Damoh			Combined		
	Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
Frequency of listening radio (in hrs) (Base: All Ever-Married women 15-49 years)									
Never	83.3	88.5	87.6	87.2	89.8	89.4	85.2	89.2	88.5
1	13.3	6.5	7.7	9.3	7.4	7.7	11.4	7.0	7.7
2	1.1	4.1	3.6	3.5	2.0	2.2	2.3	3.0	2.9
3	2.2	0.2	0.6		0.2	0.2	1.1	0.2	0.4
4+		0.7	0.6		0.7	0.5		0.7	0.6
N	90	444	534	86	460	546	176	904	1080
Mean	1.3	1.7	1.6	1.3	1.8	1.7	1.3	1.8	1.7
Best time for listening radio* (Base: Those respondents who listen radio)									
Early morning (5-9 am)	20.0	17.6	18.2	9.1	6.4	6.9	15.4	12.2	12.9
Late morning (9-12 noon)	33.3	29.4	30.3	81.8	53.2	58.6	53.8	40.8	43.5
Mid day (12-1 PM)	26.7	17.6	19.7	9.1	21.3	19.0	19.2	19.4	19.4
Early afternoon (1-4 PM)	13.3	9.8	10.6	9.1	4.3	5.2	11.5	7.1	8.1
Late afternoon (4-6 PM)	6.7	9.8	9.1	9.1	8.5	8.6	7.7	9.2	8.9
Evening (6-8 PM)	26.7	31.4	30.3	18.2	31.9	29.3	23.1	31.6	29.8
Night (8-12 midnight)	6.7	17.6	15.2	9.1	23.4	20.7	7.7	20.4	17.7
Radio Stations Listened * (Base: Those respondents who listen radio)									
Vivid Bharti	86.7	43.1	53.0	81.8	70.2	72.4	84.6	56.1	62.1
Jabalpur	20.0	13.7	15.2	18.2	63.8	55.2	19.2	37.8	33.9
AIR Delhi	13.3	11.8	12.1		6.4	5.2	7.7	9.2	8.9
Others		25.5	19.7		8.5	6.9		17.3	13.7
Don't know		21.6	16.7	18.2	10.6	12.1	7.7	16.3	14.5
N	15	51	66	11	47	58	26	98	124

(3) Exposure to Television

About 64 percent of respondents in Damoh and 61 percent of respondents in Tikamgarh had reported that they did not watch television. The corresponding proportion was comparatively high for the rural areas than urban areas. For instance, about 69 percent of respondents did not watch television in rural areas as against about 19 percent in urban areas in Tikamgarh. About 18 percent and 9 percent of respondents watched television for one hour in a day in Tikamgarh and Damoh, respectively. (Table 2-20)

About 54 percent of respondents in Damoh reported to watch television during night (8 PM-12 midnight) but about 44 percent of respondent reported the same in Tikamgarh. The corresponding proportion was reportedly high for urban areas than rural areas. About 28 percent of respondents who watched TV reported to watch it during mid day (12 Noon-1 PM) in both the districts. (Table 2-19)

The most preferred channel in Tikamgarh was Doordarshan, as reported by 89 percent of television viewers, followed by Metro (20%) and Sony (21%). Proportion of television viewers watching Doordarshan was relatively higher in rural areas than urban areas in Tikamgarh. Similar picture had emerged in Damoh also. As about 87 percent of TV viewers were watching Doordarshan followed by Metro (19%) and Sony (18%). (Table 2-20)

Table 2-20: Exposure to Television

Details	District						(in percentage) Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Frequency of watching TV (in hrs) (Base: All Ever-Married women 15-49 years)									
Never	16.7	69.4	60.5	31.4	69.8	63.7	23.9	69.6	62.1
1	17.8	18.0	18.0	12.8	8.0	8.8	15.3	12.9	13.3
2	28.9	7.2	10.9	20.9	12.8	14.1	25.0	10.1	12.5
3	18.9	2.5	5.2	19.8	6.1	8.2	19.3	4.3	6.8
4+	17.8	2.9	5.4	15.1	3.3	5.1	16.5	3.1	5.3
N	90.0	444	534	86	460	546	176	904	1080
Mean	2.8	1.8	2.2	2.5	2.2	2.3	2.7	2.0	2.2
Best time for watching TV* (Base: Those respondents who watch TV)									
Early morning (5-9 am)	4.0	0.7	1.9	3.4	3.6	3.5	3.7	2.2	2.7
Late morning (9-12 noon)	33.3	14.7	21.3	27.1	21.6	23.2	30.6	18.2	22.2
Mid day (12-1 PM)	26.7	28.7	28.0	28.8	26.6	27.3	27.6	27.6	27.6
Early afternoon (1-4 PM)	16.0	8.8	11.4	16.9	20.1	19.2	16.4	14.5	15.2
Late afternoon (4-6 PM)	5.3	5.1	5.2	16.9	4.3	8.1	10.4	4.7	6.6
Evening (6-8 PM)	14.7	23.5	20.4	16.9	18.7	18.2	15.7	21.1	19.3
Night (8-12 midnight)	49.3	40.4	43.6	64.4	49.6	54.0	56.0	45.1	48.7
TV channels watched* (Base: Those respondents who watch TV)									
Doordarshan	82.7	92.6	89.1	81.4	89.9	87.4	82.1	91.3	88.3
Metro	22.7	19.1	20.4	42.4	9.4	19.2	31.3	14.2	19.8
Sony	45.3	7.4	20.9	25.4	15.1	18.2	36.6	11.3	19.6
Star Plus	20.0	2.2	8.5	30.5	6.5	13.6	24.6	4.4	11.0
Star Movies				10.2	0.7	3.5	4.5	0.4	1.7
Star News				3.4		1.0	1.5		0.5
Star Sports				3.4	0.7	1.5	1.5	0.4	0.7
Discovery	1.3		0.5	8.5		2.5	4.5		1.5
Zee TV	26.7	4.4	12.3	8.5	12.9	11.6	18.7	8.7	12.0
Zee Movies	1.3		0.5		2.9	2.0	0.7	1.5	1.2
Others	5.3	1.5	2.8				3.0	0.7	1.5
Don't know		0.7	0.5		2.9	2.0		1.8	1.2
N	75	136	211	59	139	198	134	275	409

2.4 FERTILITY, FERTILITY PREFERENCES AND FAMILY PLANNING

This chapter detail out information on the number of living children, desire for children, preferred gender, opinion of respondent about good spacing for pregnancies and family planning.

2.4.1 Number of Living Children

The average number of living children is 2.6 with slightly more boys than girls. Table 2-21 gives data on total number of living children and also number of male and female living children across both the selected districts. Table 2-21 shows that overall, about 23 percent of ever married women reported to have 2 living children. This proportion was more or less same in both the districts. About 62 percent of respondent reported to have 3 or more living children in Damoh as against 60 percent of respondent reported the same in Tikamgarh. Mean number of living children was worked out as 2.6 children in both the districts.

About 35 percent of respondent reported to have 2 male living children in Tikamgarh as compared to 32 percent of respondent in Damoh. Around 16 percent of respondent in both the districts reported to have 3 or more male living children. Overall, about 15 percent of respondent did not have any male living children. This proportion was more or less same for both the districts. Mean number of living male children was worked out as about 1.6 male children, which was similar in both the districts. (Table 2-21)

Overall, about 38 percent of respondent reported to have 1 living female children. A similar proportion of respondent reported the same in both the districts. About 24 percent of respondent in both the districts reportedly had 2 female living children. About 14 percent of respondent had 3 or more female living children in Damoh as against 12 percent of respondent reported the same

in Tikamgarh. Mean number of female living children was worked out as 1.3 female children, which is almost same for both the districts. (Table 2-21)

Table 2-21: Number of living Children

Number of Living Children	District						Combined		
	Tikamgarh			Damoh			Male	Female	Total
	Male	Female	Total	Male	Female	Total			
0	14.3	26.1		15.1	24.7		14.7	25.4	
1	35.1	38.4	16.5	36.7	37.1	15.4	35.9	37.8	15.9
2	34.9	23.2	24.0	32.0	23.9	22.7	33.4	23.6	23.3
3	11.8	8.9	22.7	11.4	9.4	23.6	11.6	9.2	23.1
4	3.1	2.7	17.2	3.7	3.1	17.6	3.4	2.9	17.4
5	0.4	0.2	7.1	1.0	1.4	6.4	0.7	0.8	6.8
6		0.4	1.9			2.4		0.2	2.1
7	0.4		0.6		0.4	1.3	0.2	0.2	0.9
8						0.2			0.1
9						0.2			0.1
10+			0.4						0.2
Mean	1.6	1.3	2.6	1.5	1.4	2.6	1.6	1.3	2.6
N	482	482	534	490	482	546	972	972	1080

2.4.2 Desire for More Children

In order to obtain information on fertility preferences, survey asked currently pregnant and non-pregnant women: 'Would you like to have (a/another) child or would you prefer not to have any (more) children?' The study also collected information on preferred sex of the next child, the reason of preferring the gender and ideal time interval between two pregnancies.

Table 2-22 reveals that about 61 percent of currently married and non-pregnant women reported that they did not want any more children in Tikamgarh as compared to about 58 percent of respondent reported the same in Damoh. The corresponding proportion of currently married and non-pregnant women was reported to be higher in urban areas than rural areas of both the districts. Overall, about 10 percent of the respondent reported that they could not get pregnant either because they are sterilised or declared in fecund, the proportion being high in Damoh (13%) than Tikamgarh (7%). Desire for more children was reported to be slightly high in Tikamgarh as compared to Damoh. As about 30 percent of respondent reported that they wanted to have more children in Tikamgarh as compared to 28 percent in Damoh.

Table 2-22 indicates that relatively high proportion of respondents desired to have a boy as their next child than girl child in both the districts. Nearly two-third of respondent who reported to have more children wanted to have their next child to be a boy in Tikamgarh as against about 23 percent reported to have girl child. More or less same picture had emerged from Damoh (62% and 24%). A relatively high proportion of urban respondents reported to have a boy as their next child as compared to respondents dwelling in rural areas in both the districts. About 10 percent of respondent in Tikamgarh and 13 percent in Damoh reported that gender of the next child did not matter to them.

Overall, about 27 percent of respondent who wanted their next child to be a boy or girl had reported to prefer this gender because he or she would be helpful either in household activities or work. This proportion was as high as 33 percent in Tikamgarh as compared to 21 percent in Damoh. In Damoh, about 26 percent of respondent reported to prefer the gender because respondent liked that gender as compared to 20 percent in Tikamgarh. Other main reasons for preferring the gender were 'she does not have that gender' (21% in Damoh & 20% in Tikamgarh), and 'husbands or parents-in-law prefers that gender' (15% in Damoh & 9% in Tikamgarh). (Table 2-22)

The distribution of currently pregnant and non-pregnant women desiring more children by number of living children is presented in Table 2-23. The cross-tabulation analysis in Table 2-23 depicts

that the proportion of respondent desiring more children had decreased with the increase in the number of living children in both the districts. For instance, in Tikamgarh, the proportion of currently married women desiring more children had gone down from 94 percent for those who did not have any living children to 70 percent for those who had one living children. This proportion declined further with the increase in number of living children and it was reported to be about 7 percent for those who had 6 or more living children. The same pattern can also be observed in case of Damoh also. A desire to end childbearing predominates after the second child at which point 69% of women report wanting no more, and it increases with higher parity. (However, 27% at parity 2 want more.) Even more rural husbands report they want to end childbearing (65% in Tikamgarh and 60% in Damoh). (See 2.8)

Table 2-22: Desire for children, preferred genders of the additional children and reason for preferring the gender

Desire for Children	District						(in percentage) Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Desire for additional Children									
(Base : All currently married women those are not currently pregnant or don't know whether pregnant)									
Want more	28.4	30.7	30.3	23.3	28.5	27.6	26.0	29.6	29.0
Want no more	67.9	59.1	60.6	61.6	57.2	57.9	64.9	58.1	59.3
Can not get pregnant	2.5	8.2	7.2	15.1	12.0	12.5	8.4	10.1	9.8
Up to God		0.5	0.4		1.0	0.9		0.8	0.6
Undecided	1.2	1.5	1.5		1.3	1.1	0.6	1.4	1.3
N	81	391	472	73	383	456	154	774	928
Preferred Gender for additional Children									
(Base: All currently married women desiring additional children excluding currently pregnant women)									
Girl Child	17.4	24.0	22.9	21.1	25.0	24.4	19.0	24.5	23.6
Boy Child	78.3	63.6	66.0	73.7	59.8	61.8	76.2	61.8	64.0
It does not matter	4.3	10.7	9.7	5.3	14.3	13.0	4.8	12.4	11.3
Don't know		1.7	1.4		0.9	0.8		1.3	1.1
N	23	121	144	19	112	131	42	233	275
Reason of preferring the gender									
(Base: All currently women desiring either a girl or a boy and all currently pregnant women)									
Economic Reason	20.0	10.0	11.1	40.0	11.9	14.9	30.0	11.0	13.0
Help in house or work		37.5	33.3		23.8	21.3		30.5	27.2
Husband or parents-in-law prefers that gender		10.0	8.9	20.0	14.3	14.9	10.0	12.2	12.0
Society prefers that gender		2.5	2.2					1.2	1.1
She likes that gender	40.0	17.5	20.0	20.0	26.2	25.5	30.0	22.0	22.8
She does not have that gender	40.0	17.5	20.0	20.0	21.4	21.3	30.0	19.5	20.7
Others		5.0	4.4		2.4	2.1		3.7	3.3
N	5	40	45	5	42	47	10	82	92

The cross-tabulation analysis of preferred gender of next children by number of living children, presented in Table 2-23, indicates that there did not exist any pattern in the proportion of respondent preferring to have either a boy or a girl as their next child with the increase in the number of living children in both the districts. For instance, in Tikamgarh, the proportion of respondent desiring to have their next child to be a boy went down from 61 percent for those who did not have any living child to 59 percent for those who had one living child. It went up to 64 percent for the women having two living children and subsequently it declined again for three living children. Similar type of pattern had emerged for girl child.

Table 2-23: Desire for children and preferred gender of additional children by number of living children

Details	Tikamgarh							Damoh						
	0	1	2	3	4	5	6+	0	1	2	3	4	5	6+
Desire for additional Children (Base : All currently married women those are not currently pregnant or don't know whether pregnant)														
Want more	94.3	70.0	27.2	16.4	8.0	8.3	7.1	90.9	81.5	27.2	13.8	1.1	11.8	10.0
Want no more		20.0	69.3	74.1	75.9	83.3	78.6		16.7	60.2	68.3	78.7	76.5	65.0
Can not get pregnant	5.7	5.7	3.5	7.8	12.6	5.6	14.3	6.1		10.7	16.3	19.1	8.8	20.0
Up to God		1.4				2.8		3.0	1.9		1.6			
Undecided		2.9		1.7	3.4					1.9		1.1	2.9	5.0
N	35	70	114	116	87	36	14	33	54	103	123	89	34	20
Preferred Gender for additional Children (Base: All currently married women desiring additional children including currently pregnant women)														
Girl Child	12.2	34.8	26.2	28.6	25.0		50.0	23.1	33.3	17.4	23.8		20.0	
Boy Child	61.2	59.1	64.3	61.9	66.7	100	50.0	38.5	52.2	65.2	66.7	25.0	60.0	66.7
It does not matter	24.5	4.5	9.5	9.5	8.3			38.5	14.5	15.2	9.5	75.0	20.0	
Don't know	2.0	1.5								2.2				33.3
N	49	66	42	21	12	4	2	52	69	46	21	4	5	3

Details	Combined							
	0	1	2	3	4	5	6+	
Desire for additional Children (Base : All currently married women those are not currently pregnant or don't know whether pregnant)								
Want more	92.6	75.0	27.2	15.1	4.5	10.0	8.8	
Want no more		18.5	65.0	71.1	77.3	80.0	70.6	
Can not get pregnant	5.9	3.2	6.9	12.1	15.9	7.1	17.6	
Up to God	1.5	1.6		0.8		1.4		
Undecided		1.6	0.9	0.8	2.3	1.4	2.9	
N	68	124	217	239	176	70	34	
Preferred Gender for additional Children (Base: All currently married women desiring additional children including currently pregnant women)								
Girl Child	17.8	34.1	21.6	26.2	18.8	11.1	20.0	
Boy Child	49.5	55.6	64.8	64.3	56.3	77.8	60.0	
It does not matter	31.7	9.6	12.5	9.5	25.0	11.1		
Don't know	1.0	0.7	1.1				20.0	
N	101	135	88	42	16	9	5	

2.4.3 Ideal Time between two pregnancies

Knowledge of the need to space pregnancies is nearly universal: nine out of ten women and men report that there should be at least two years between pregnancies, and adults and adolescents of both sexes report in focus groups that intervals of two to five years is important. Among the reasons for the need to space pregnancies, the health of mother and child and economic well being predominate.

Information on the ideal time interval between two pregnancies and source of learning the same was collected from all the ever-married women. This information is presented in Table 2-24. The table delineates that overall, about 28 percent of respondent had reported that the ideal time interval between two pregnancies was three years and more, the proportion being 28 percent in Damoh and 27 percent in Tikamgarh. The proportion of respondent who reported three years or more as an ideal time interval between two pregnancies was relatively high in urban areas (43 percent in Tikamgarh and 45 percent in Damoh) as compared to rural areas (23 percent in Tikamgarh & 25 percent in Damoh). Overall, about 49 percent of respondent had reported two years as an ideal time interval between two pregnancies. More or less a similar proportion was

reported in both the districts. About 13 percent to 16 percent of respondents in rural areas of Damoh and Tikamgarh were not able to report ideal time interval between two pregnancies.

In focus groups carried out with adolescent and adult men and women, participants reported that the benefits of spacing at least two or three years allow for improvement of the couple's economic situation and the woman's health. However, while the groups stated that newly married couples should wait at least two year for the first baby in order to enjoy marital life together, they recognized the social difficulties involved since the communities tend to make fun of couples who do not produce a pregnancy soon after marriage. In all, there is a gap between knowledge of beneficial practices and what social pressure and traditional practices allow them to do.

The most important sources of information about spacing for both men and women were reported to be television and friends, relatives or neighbours, the latter group being the traditional source of information about family life and sexual relations. As high as about 54 percent of respondent who reported three years or more an ideal time interval between the two pregnancies (a good spacing for pregnancy) had learned this from television in Damoh as compared to 46 percent in Tikamgarh. The corresponding proportion was relatively high for urban areas (64% in Tikamgarh and 85% in Damoh) as compared to rural areas (39% in Tikamgarh and 45% in Damoh). The other sources of learning about good spacing for pregnancy were friend, relative, neighbour (19% in Tikamgarh and 16% in Damoh), Nurse/Pvt. doctor (5% in Tikamgarh and 3% in Damoh) and ANM/MPW/Sub Centre (8% in Tikamgarh and 7% in Damoh). (Table 2-24)

Table 2-24: Opinion of respondents about the ideal time between two pregnancies and source of learning good spacing for pregnancies

Desire for Children	District						(in percentage)		
	Tikamgarh			Damoh			Combined		
	Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
Ideal time between two pregnancies (Base : All ever-married women 15-49 yrs)									
<1 Year	1.1	0.7	0.7	1.2	3.5	3.1	1.1	2.1	1.9
1 Year	3.3	12.2	10.7	4.7	7.4	7.0	4.0	9.7	8.8
2 Years	48.9	48.0	48.1	40.7	51.3	49.6	44.9	49.7	48.9
3 Years or more	43.3	23.2	26.6	45.3	25.2	28.4	44.3	24.2	27.5
Don't know	3.3	16.0	13.9	8.1	12.6	11.9	5.7	14.3	12.9
N	90	444	534	86	460	546	176	904	1080
Source of learning about good spacing between two pregnancies (Base: All ever married women 15-49 yrs reporting three years or more as interval between two pregnancies)									
Television	64.1	38.8	45.8	84.6	44.0	54.2	74.4	41.6	50.2
Radio		2.9	2.1	5.1	9.5	8.4	2.6	6.4	5.4
Read about it	5.1	1.9	2.8		1.7	1.3	2.6	1.8	2.0
ANM/MPW/Sub Centre		10.7	7.7		8.6	6.5		9.6	7.1
Nurse/Pvt Doctor	2.6	5.8	4.9		3.4	2.6	1.3	4.6	3.7
Govt Doctor	2.6	1.0	1.4		1.7	1.3	1.3	1.4	1.3
Anganwadi worker		3.9	2.8		2.6	1.9		3.2	2.4
Friend, relative, neighbour	20.5	18.4	19.0	10.3	17.2	15.5	15.4	17.8	17.2
Husband		1.0	0.7		1.7	1.3		1.4	1.0
Mother in-law	2.6	3.9	3.5		0.9	0.6	1.3	2.3	2.0
Others	2.6	11.7	9.2		8.6	6.5	1.3	10.0	7.7
N	39	103	142	39	116	155	78	219	297

2.4.4 Knowledge & Current use of Family Planning Methods

Knowledge of some methods of family planning is at less than optimum levels even among women who receive services from the government health sector. In our beneficiary survey women were asked to name all the ways they know to prevent a pregnancy. Not surprisingly, the most frequently mentioned was female sterilization (85%), closely followed by the pill (84%). Two-thirds mentioned the IUD, and a little over half, the condom. Only a quarter of women

spontaneously mentioned vasectomy, and fewer than 2% mentioned any traditional method or injectables, a method available from some private sector sources but not in the public sector. While knowledge of the existence of a method is not sufficient to increase its use - witness the high levels of knowledge but low levels of use of the pill - it is a first step.

In focus groups adults and adolescents of both sexes said that they generally learn about sex and family life from their married brother-in-law, sister-in-law, their married friends, or a married sister. They generally learn about childcare from their parents and other elders.

Information on current use of contraception, its source and also reasons of using the method was gathered from currently married and non-pregnant women and is presented in this section.

Table 2-25 reveals that about 58 percent of currently married and non-pregnant women reported to use some method of contraception at the time of survey in Damoh as against about 51 percent of respondents reported the same in Tikamgarh. The current users of any family planning method were higher in urban areas (67% in Damoh and 60% in Tikamgarh) than rural areas (56% in Damoh and 49% in Tikamgarh). Overall, about 47 percent of respondents were reported to be sterilised. The corresponding proportion was relatively high in Damoh (52%) as compared to Tikamgarh (43%). About one percent of respondents in both the districts reported that their husbands were sterilized. About 6 percent of respondents in Tikamgarh and about 3 percent of respondents in Damoh were currently using any of the three officially sponsored spacing method- condoms, oral pill and IUD.

Table 2-25: Current use of contraception of currently married and non-pregnant women 15-49 years

(in percentage)

Current use of contraception	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Not using anything	39.5	51.4	49.4	32.9	43.6	41.9	36.4	47.5	45.7
Female Sterilisation	42	42.7	42.6	60.3	50.1	51.8	50.6	46.4	47.1
Male Sterilisation	1.2	0.8	0.8		0.8	0.7	0.6	0.8	0.8
Condom/Nirodh	12.3	3.1	4.7	2.7	0.8	1.1	7.8	1.9	2.9
IUD/Loop				1.4	0.5	0.7	0.6	0.3	0.3
Pill	3.7	0.5	1.1	1.4	1.3	1.3	2.6	0.9	1.2
Rhythm/Safe Period		1.3	1.1	1.4	2.9	2.6	0.6	2.1	1.8
Withdrawal/Other natural	1.2		0.2				0.6		0.1
Other		0.3	0.2					0.1	0.1
N	81	391	472	73	383	456	154	774	928

In order to know the awareness about the source of hearing currently used method, a question 'where did you hear about this method' was addressed to current users of any family planning method. Table 2-26 indicates that about 39 percent of current users of sterilisation in Damoh and 29 percent in Tikamgarh reported to hear it from husband. Other sources of hearing this method were ANM/LHV (22% in Tikamgarh & 17% in Damoh), government doctor (17% in Damoh & 15% in Tikamgarh), nurse (16% in Tikamgarh and 7% in Damoh), other relative (14% in Damoh and 12% in Tikamgarh) and remaining sources were reported by less than 5 percent of respondent in both the districts. For the officially sponsored spacing method, the major source of hearing any of the spacing method was husband in both the districts. Followed by government doctor, nurses and television. Proportions for the spacing methods need to be interpreted carefully as bases are very small.

Table 2-26: Source of knowing currently used family planning method

(in percentage)

	Tikamgarh							Damoh								
	Fs	MS	Con	IUD	Pill	Ryth	WD	Oth	FS	MS	Con	IUD	Pill	Ryth	WD	Oth
Source (Base: All non pregnant currently married women aged 15-49 yrs using any FP method)																
Husband	29.4	25.0	50.0		20.0				39.0		80.0	33.3	16.7			
Govt Doc	14.9		27.3		20.0				16.5		20.0		33.3			
Nurse	15.9		9.1		20.0				7.2	33.3	20.0					
ANM/LHV	22.4		4.5						17.4			33.3				
Male MPW	1.5								3.0							
Anganwadi Worker	5.0	50.0	4.5						5.5		20.0		16.7			
Other Gov worker									1.7	33.3						
Private Doc	2.5								1.3				16.7			
Dai	0.5		4.5						0.8							
Mother/Mother in-law	2.5								3.0							
Other Relatives/Friend	11.9		4.5						14.4			33.3	16.7			
None/Self	5.5				20.0				0.8							
Radio	2.0		4.5													
TV	3.5	25.0	13.6		20.0				0.4				16.7			
Newspaper					20.0											
Hoarding/ Wall Paintings	0.5															
Others	5.0							100	1.7	33.3						
N	201	4	22	5	1			1	236	3	5	3	6			6

	Combined								
	FS	MS	Con	IUD	Pill	Ryth	WD	Oth	
Source (Base: All non pregnant currently married women aged 15-49 yrs using any FP method)									
Husband	34.6	14.3	55.6	33.3	18.2				
Govt Doc	15.8		25.9		27.3				
Nurse	11.2	14.3	11.1		9.1				
ANM/LHV	19.7		3.7	33.3					
Male MPW	2.3								
Anganwadi Worker	5.3	28.6	7.4		9.1				
Other Gov worker	0.9	14.3							
Private Doc	1.8				9.1				
Dai	0.7		3.7						
Mother/Mother in-law	2.7								
Other Relatives/Friend	13.3		3.7	33.3	9.1				
None/Self	3.0				9.1				
Radio	0.9		3.7						
TV	1.8	14.3	11.1		18.2				
Newspaper					9.1				
Hoarding/ Wall Paintings	0.2								
Others	3.2	14.3						100	
N	437	7	27	3	11			1	

Table 2-27 provides details of the sources of obtaining the currently used method. A glance on the table indicates that about 53 percent of current users of sterilisation in Damoh and about 39 percent in Tikamgarh were reported to be sterilised at government camp. Other sources from where sterilisation was obtained were PHC (31% in Tikamgarh & 14% in Damoh), District Hospital (24% in Damoh and 23% in Tikamgarh) and remaining sources like SC/ANM/MPW, Anganwadi Centre, private practitioner, CHC were reported by very small proportion of respondents in both the districts. Those respondents who reported that their husband using sterilisation was reported to obtain it either district hospital as in Tikamgarh or government camp in Damoh. The source of obtaining spacing methods was mainly PHC, district hospital and CHC.

Percentages for the male sterilisation and any spacing method need to be interpreted carefully as the base are very small.

Table 2-28 indicates that the main reason of using female sterilisation was that the respondent did not want to have any more children as reported by about 78 percent of respondent in Tikamgarh and 65 percent of respondent in Damoh. 'Husband wanted', (7% in Tikamgarh & 6% in Damoh); 'My health' (16% in Damoh & 8% in Tikamgarh) were reported to be other reasons for using sterilisation. The reasons of using spacing method were mainly 'spacing', 'health', 'husband wanted' and 'my health'. Percentages for the male sterilisation and any spacing method need to be interpreted carefully as the base are very small.

When the couple was not using a method, the reason was a desire for more children among nearly two-thirds of the men, while the health of the woman or fear of side effects accounted for a fifth of non-use, fairly low by international standards. Nevertheless, in focus groups males and females, adults and adolescents mentioned beliefs that pills cause numerous side effects, such as heating of body, pain in waist or wrist, and others. They also mentioned that vasectomy causes weakness in men, which appears to be a very widespread belief and a serious barrier in a population that earns a living through manual labour. Some women mentioned specific incidents of women who experienced problems following tubectomy. Although fear of side effects may not be a large barrier to using some family planning method, numerous myths exist in this population, and they serve to prevent use of certain methods, notably vasectomy.

Table 2-27: Source of obtaining the currently used family planning method (in percentage)

	Tikamgarh					Damoh				
	Fs	MS	Con	Pill	Oth	FS	MS	Con	IUD	Pill
Source (Base: All non pregnant currently married women aged 15-49 yrs using any FP method)										
District Hospital	23.4	100.0	9.1	20.0		24.2			33.3	
CHC	3.5		4.5			3.4				
PHC	31.3		13.6	20.0		14.4		20.0		33.3
SC/ANM/MPW	1.0		4.5	20.0		3			33.3	16.7
Anganwadi centre or Worker			4.5					20.0		16.7
Private practitioner	0.5		9.1			0.8		20.0	33.3	
Government Camp	38.8					53.0	100.0			
Other	1.5		54.5	40.0	100.0	1.3		40.0		33.3
N	201	4	22	5	1	236	3	5	3	6

	Combined						
	FS	MS	Con	IUD	Pill	Oth	
Source (Base: All non pregnant currently married women aged 15-49 yrs using any FP method)							
District Hospital	23.8	57.1	7.4	33.3	9.1		
CHC	3.4		3.7				
PHC	22.2		14.8		27.3		
SC/ANM/MPW	2.1		3.7	33.3	18.2		
Anganwadi centre or Worker			7.4		9.1		
Private practitioner	0.7		11.1	33.3			
Government Camp	46.5	42.9					
Other	1.4		51.9		36.4	100	
N	437	7	27	3	11	1	

Table 2-28: Main reason of using current family planning method

(in percentage)

	Tikamgarh							Damoh					
	Fs	MS	Con	Pill	Ryt	WD	Oth	FS	MS	Con	IUD	Pill	Ryth
Reasons (Base: All currently married women aged 15-49 yrs using any family planning method)													
Husband wanted	7.0		18.2			100		5.9	20.0				8.3
Her health	7.5	50.0	22.7	20.0				15.7				33.3	8.3
Poor and economic consideration	6.0		4.5	20.0				12.3					
Do not want more children	77.6	50.0	13.6	20.0	40.0			65.3	100		33.3	50.0	16.7
Spacing	0.5		40.9	40.0	60.0					80.0	66.7	16.7	66.7
Other	1.5						100.0	0.8					
N	201	4	22	5	5	1	1	236	3	5	3	6	12

	Combined									
	FS	MS	Con	IUD	Pill	Ryth	WD	Oth		
Reasons (Base: All currently married women aged 15-49 yrs using any family planning method)										
Husband wanted	6.4		18.5			5.9	100.0			
Her health	11.9	28.6	18.5		27.3	5.9				
Poor and economic consideration	9.4		3.7		9.1					
Do not want more children	70.9	71.4	11.1	33.3	36.4	23.5				
Spacing	0.2		48.1	66.7	27.3	64.7				
Other	1.1									100.0
N	437	7	27	3	11	17	1	1		

Table 2-29 presents information on the decision-maker about the number of children. The table shows that about 68 percent of the respondents in Damoh and 59% in Tikamgarh reported that respondent and her husband jointly decides about the number of children they would have in their lifetime. The corresponding proportion was relatively high in urban areas as compared to rural areas in both the districts. Overall, 28 percent of respondent reported that decision about the number of children they would have in their lifetime was taken by husband, the proportion being 32 percent in Tikamgarh and 25 percent in Damoh. About 5 percent of respondents in Tikamgarh and 3 percent in Damoh were reported that the respondent herself had take decision about the number the children they would have in their life time.

Nearly two-thirds of women and men reported that the husband and wife should make the decision together about the number of children in the family. However, among those who felt that one or the other should make the decision, women reported the husband seven times more often than the wife. More rural women reported the husband should make this decision than urban women. Husbands almost never stated the wife should make the decision (1%). (See 2.8 for Husband's perception)

Table 2-29: Opinion of currently married women about the decision-maker of number of children

Decision Makers (Base: All currently Married Women)	District						(in percentage) Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Husband	21.0	33.8	31.6	15.1	26.4	24.6	18.2	30.1	28.1
Herself	3.7	4.9	4.7	1.4	3.1	2.9	2.6	4.0	3.8
Husband & wife together	72.8	55.5	58.5	82.2	65.5	68.2	77.3	60.5	63.3
God		0.8	0.6		0.8	0.7		0.8	0.6
Parent in-law		4.6	3.8		3.1	2.6		3.9	3.2
Other		0.3	0.2		0.3	0.2		0.3	0.2
Don't know	2.5	0.3	0.6	1.4	0.8	0.9	1.9	0.5	0.8
N	81	391	472	73	383	456	154	774	928

2.4.5 Unwanted Pregnancy and Abortion

This section gives information whether a woman in their life time ever had unwanted pregnancy, if yes, whether had induced abortion at that time, decision maker for the abortion and place of conducting abortion. It also focuses on the number of induced abortions.

Table 2-30 depicts that about 5 percent of ever-married women reported that they had a pregnancy that was not convenient for her or her family in Tikamgarh as against 3 percent in Damoh. Overall, about 54 percent of respondent who ever had unwanted pregnancy reported to have induced abortion that time. The corresponding proportion was 56 percent in Tikamgarh and 50 percent in Damoh. Persons who decided to have abortion at that time were mainly either respondent 'herself', or her husband or husband and respondent jointly in both the districts. Places where respondent had abortion at that time were mainly private clinic and CHC /Hospitals in both the districts. Proportions, given in the table, should be interpreted carefully as the bases are very small.

Knowledge of where to obtain an abortion appears to be universal, judging from focus groups discussions with both youth and adults. They expressed an acceptance of the practice, more for unmarried than married women.

Table 2-30: Unwanted Pregnancy, Induced abortion at that time, Decision maker for induced abortion and place of performing the Abortion

Details	District						(in percentage) Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Whether ever had unwanted pregnancy (Base: all ever-married women aged 15-49 yrs)									
Yes	7.8	4.1	4.7	2.3	2.6	2.6	5.1	3.3	3.6
No	92.2	95.9	95.3	97.7	97.4	97.4	94.9	96.7	96.4
N	90	444	534	86	460	546	176	904	1080
Whether had induced abortion at that time (Base: Those ever-married women aged 15-49 years having unwanted pregnancy)									
Yes	71.4	50.0	56.0	50.0	50.0	50.0	66.7	50.0	53.8
No	28.6	50.0	44.0	50.0	50.0	50.0	33.3	50.0	46.2
N	7	18	25	2	12	14	9	30	39
Decision maker for the abortion (Base: Those ever-married women aged 15-49 years having unwanted pregnancy and induced abortion)									
Herself	60.0	11.1	28.6		16.7	14.3	50	13.3	23.8
Husband	20.0	66.7	50.0				16.7	40.0	33.3
Both	20.0	11.1	14.3			71.4	16.7	40.0	33.3
Other person in household				100.0		14.3	16.7		4.8
Jointly with others in the household		11.1	7.1					6.7	4.8
N	5	9	14	1	6	7	6	15	21

Details	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Place where abortion was performed (Base: Those ever-married women aged 15-49 years having unwanted pregnancy and induced abortion)									
At home		11.1	7.1		16.7	14.3		13.3	9.5
At Dai's home		22.2	14.3		16.7	14.3		20.0	14.3
In CHC/Hospital	20.0	33.3	28.6		33.3	28.6	16.7	33.3	28.6
In PHC	20.0	11.1	14.3		16.7	14.3	16.7	13.3	14.3
Private clinic	60.0	22.2	35.7	100.0	16.7	28.6	66.7	20.0	33.3
N	5	9	14	1	6	7	6	15	21

Table 2-31 gives number of induced abortion ever-married women ever had at the time of survey. The table indicates that 5 out of 7 women who ever had induced abortion in Damoh and 8 out of 14 such women in Tikamgarh were reported to have one induced abortion, 3 out of 14 women in Tikamgarh and 2 out of 7 women in Damoh who ever had abortion reported two induced abortions at the time of survey.

Table 2-31: Number of induced abortion

Number of Induced Abortion (Base: All ever-married women who said yes)	District						(in percentage) Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
1	60.0	55.6	57.1		83.3	71.4	50.0	66.7	61.9
2	40.0	11.1	21.4	100.0	16.7	28.6	50.0	13.3	23.8
3+		11.1	7.1					6.7	4.8
N	5	9	14	1	6	7	6	15	21
Mean	1.4	1.1	1.2	2	1.2	1.3	1.5	1.1	1.2

2.5 WOMEN'S AUTONOMY

Education, work participation, and exposure to outside world through mass media and participation in different community activities are some of the means by which women gain status and autonomy, both important aspects of their empowerment. Women's autonomy is likely to have a significant impact on the demographic and health seeking behavior of couples by altering women's relative control over fertility and contraceptive use, and by influencing their attitudes and abilities. To measure women's empowerment and women's autonomy more directly, the survey asked about women's access to money that they could spend as they wish, participation in household decision making, awareness of women about community activities and participation in these activities.

2.5.1 Women's Access to Money

In order to know women's access to money, the study asked workingwomen 'whether women keep money that they earned with themselves' and 'how they spend money'. Non-working women were asked about 'whether they would like to have income of their own, if yes, how they will be spending money and whether they would be allowed to work inside the house and outside the house for earning their own income'. This information is presented in Table 2-32.

The table reveals that only about 17 percent of workingwomen in Damoh as against 12 percent in Tikamgarh reported to keep the entire money with them. Overall about 54 percent of working ever-married women reported that whatever money they earned they gave all the money to their husbands. This proportion was relatively high for the workingwomen in Tikamgarh (63%) than in Damoh (49%). About 34 percent of working women in Damoh reported to keep some of their earned money with them and remaining amount they gave to their husband. Only 23 percent of the workingwomen reported the same in Tikamgarh. Table 2-32 further shows that about 65 percent of workingwomen in Damoh reported to spend their earned money on children's

expenses as compared to 43 percent of working women in Tikamgarh. In Tikamgarh, proportion of working women spending their earned money on household expenses was higher (51%) than Damoh (33%). About 55 percent of workingwomen in Tikamgarh and 51 percent of women in Damoh had reported to spending their money on food. A small proportion of workingwomen in Tikamgarh (9%) and Damoh (4%) reported to spend money for their own expenses.

In response to a question from non-working ever-married women, about their opinion to have income of their own, as high as 75 percent of respondent reported affirmatively in Tikamgarh as compared to 64 percent in Damoh. In order to understand how women would spend their money if they would have, most of them in Tikamgarh reported to spend it on household expenses (72%) as against 45 percent in Damoh. Other main heads under which they would like to spend their earned money were children's expenses (54% in Tikamgarh & 50% in Damoh) and food (39% in Damoh & 26% in Tikamgarh). Only about 12 percent of respondent reported to be spending income on their personal expenses in both the districts. (Table 2-32)

A large majority of non-working ever-married women reported that they would be allowed to earn their own income by working inside the house in both the districts (98% in Damoh & 97% in Tikamgarh), This proportion was relatively high in rural areas as compared to urban areas of both the districts. But overall, about 53 percent of respondents reported that they would be given permission to work out side and earn their own income. The corresponding proportion was 56 percent for Tikamgargh and 48 percent for Damoh. The proportion of women reporting to get permission to work outside the home was slightly high in urban areas that in rural areas in Damoh and lower in Tikamgarh.

Table 2-32: Practice and Opinion of ever-married women aged 15-49 years about her own income

Details	District						(in percentage)		
	Tikamgarh			Damoh			Combined		
	Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
Whether respondent keeps her own income or give it to husband or someone else (Base: All currently working ever-married women aged 15-49 yrs)									
Woman keeps it entirely	25.0	10.8	12.0	29.6	15.7	17.2	28.2	13.8	15.3
Woman gives it all to husband	16.7	66.9	62.7	33.3	51.2	49.2	28.2	57.1	54.1
Woman keeps some, gives some to husband	58.3	20.0	23.2	37.0	33.2	33.6	43.6	28.2	29.8
Other		2.3	2.1					0.9	0.8
N	12	130	142	27	217	244	39	347	386
Type of expenses made from her own income * (Base: Those currently working ever married women aged 15-49 yrs who keep partially or all her income)									
Food	70.0	51.2	54.7	72.2	47.2	50.8	71.4	48.3	52.0
Household expenses	40.0	53.5	50.9	33.3	33.0	33.1	35.7	38.9	38.4
Own personal expenses	10.0	9.3	9.4	5.6	3.8	4.0	7.1	5.4	5.6
Children's expenses	70.0	37.2	43.4	55.6	66.0	64.5	60.7	57.7	58.2
Savings		9.3	7.5	22.2	0.9	4.0	14.3	3.4	5.1
Others		2.3	1.9					0.7	0.6
N	10	43	53	18	106	124	28	149	177
Whether respondent likes to have income of her own (Base: All ever married women aged 15-49 years who are not currently in any gainful employment)									
Yes	75.6	74.5	74.7	44.1	68.3	63.6	62.0	71.8	69.9
No	24.4	25.5	25.3	54.2	31.7	36.1	37.2	28.2	30.0
Don't know				1.7		0.3	0.7		0.1
N	78	314	392	59	243	302	137	557	694

Details	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Type of expenses that she would like to made from her own income* (Base: Those ever-married women aged 15-49 years who would like to have their own income)									
Food	40.7	21.8	25.6	50.0	37.3	39.1	43.5	28.3	30.9
Household expenses	52.5	76.5	71.7	38.5	45.8	44.8	48.2	63.8	61.0
Own personal expenses	18.6	10.7	12.3		13.9	12.0	12.9	12.0	12.2
Children's expenses	52.5	54.3	53.9	42.3	51.2	50.0	49.4	53.0	52.4
Savings	10.2	6.4	7.2	15.4	8.4	9.4	11.8	7.3	8.0
Others	1.7	0.9	1.0		1.2	1.0	1.2	1.0	1.0
N	59	234	293	26	166	192	85	400	485
Whether allowed to earn an income working in your home (Base: Those ever-married women aged 15-49 years who would like to have their own income)									
Yes	93.2	98.3	97.3	92.3	98.8	97.9	92.9	98.5	97.5
No	3.4	1.3	1.7	7.7	0.6	1.6	4.7	1.0	1.6
Don't know	3.4	0.4	1.0		0.6	0.5	2.4	0.5	0.8
Whether allowed to earn an income working in outside the home (Base: Those ever-married women aged 15-49 years who would like to have their own income)									
Yes	50.8	57.7	56.3	50.0	48.2	48.4	50.6	53.8	53.2
No	45.8	37.6	39.2	50.0	50.6	50.5	47.1	43.0	43.7
Don't know	3.4	4.7	4.4		1.2	1.0	2.4	3.3	3.1
N	59	234	293	26	166	192	85	400	485

Note: * Percentage is not added to 100, as it is a multiple response

2.5.2 Decision Makers for various household activities

The study asked women to report who in their households made decision about the following: on the purchase of household items, items to cook, obtaining health care for herself, and education of children. Data related to this information are presented in Table 2-33

Table 2-33 indicates that about 51 percent of respondents were not involved at all in decision of purchasing of household items in both the districts. About 38 percent to 39 percent of respondents in Tikamgarh as well as Damoh made such decisions jointly with their husbands or someone else in the household. Only about 3 percent of respondent made this decision themselves in Damoh as against about 1 percent in Tikamgarh. The proportion of respondents involved in decision making of purchasing household items either with husbands or other household member was relatively high for urban areas than rural areas for both the districts.

About 38 percent of respondents in Damoh reported to decide themselves about what to cook as against 31 percent in Tikamgarh. About 28 percent of the respondents made this decision jointly with their husband or someone else in the household in both the districts. Remaining respondents in both the districts reported that they were not at all involved in decision about the items to be cooked in both the districts. (Table 2-33)

A very small proportion of respondents, ranging between 2 percent to 5 percent in Damoh as well as Tikamgarh, reportedly decided about her health care themselves. About 28 percent of respondents in Tikamgarh as well as about 30 percent in Damoh reported to decide jointly with their husbands or someone else in the household. A large proportion of respondents, ranging from 65 percent to 68 percent respondents in Damoh and Tikamgarh, reported that they were not all involved in decision about seeking health care for themselves. (Table 2-33)

About 2 percent of respondents in both the districts made decisions about the education of their children themselves. About 37 percent of respondents in Damoh reported to make such decision jointly with their husbands or someone else in their household as against about 31 percent in Tikamgarh. About 43 percent to 50 percent in Damoh and Tikamgarh were not involved at all in such decisions. Remaining respondents reported that they did not have any children in school going age in both the districts. (Table 2-33).

Table 2-33: Decision makers for various household activities

(in percentage)

Details	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Decision maker for the purchase of household items (Base: All ever-married women aged 15-49 yrs)									
Myself	1.1	1.4	1.3	4.7	3.0	3.3	2.8	2.2	2.3
Husband	41.1	48.4	47.2	38.4	51.3	49.3	39.8	49.9	48.2
Wife & Husband jointly	38.9	29.5	31.1	34.9	29.1	30.0	36.9	29.3	30.6
Others in household	2.2	3.6	3.4	3.5	1.7	2.0	2.8	2.7	2.7
Jointly with others in household	10.0	6.3	6.9	15.1	7.8	9.0	12.5	7.1	8.0
Head of household	6.7	10.8	10.1	3.5	7	6.4	5.1	8.8	8.2
Decision maker for the items to be cooked (Base: All ever-married women aged 15-49 yrs)									
Myself	35.6	30.2	31.1	44.2	36.7	37.9	39.8	33.5	34.5
Husband	7.8	27.9	24.5	5.8	20.9	18.5	6.8	24.3	21.5
Wife & Husband jointly	35.6	20.5	23.0	34.9	21.7	23.8	35.2	21.1	23.4
Mother-In-Law	8.9	11.0	10.7	8.1	12.8	12.1	8.5	11.9	11.4
Others in household	4.4	2.5	2.8	1.2	2.0	1.8	2.8	2.2	2.3
Jointly with others in household	4.4	5.2	5.1	4.7	3.0	3.3	4.5	4.1	4.2
Head of household	3.3	2.7	2.8	1.2	2.8	2.6	2.3	2.8	2.7
Decision maker for obtaining health care (Base: All ever-married women aged 15-49 yrs)									
Myself	4.4	4.7	4.7	5.8	1.5	2.2	5.1	3.1	3.4
Husband	52.2	57.7	56.7	48.8	56.7	55.5	50.6	57.2	56.1
Wife & Husband jointly	26.7	22.5	23.2	34.9	25.4	26.9	30.7	24.0	25.1
Mother-In-Law	5.6	6.3	6.2	5.8	5.2	5.3	5.7	5.8	5.7
Others in household	4.4	2.9	3.2	1.2	2.8	2.6	2.8	2.9	2.9
Jointly with others in household	5.6	4.3	4.5	2.3	6.5	5.9	4.0	5.4	5.2
Head of household	1.1	1.6	1.5	1.2	1.7	1.6	1.1	1.7	1.6
Decision maker about children's education (Base: All ever-married women aged 15-49 yrs)									
Myself	1.1	2.0	1.9	3.5	1.7	2.0	2.3	1.9	1.9
Husband	46.7	47.7	47.6	34.9	43.3	41.9	40.9	45.5	44.7
Wife & Husband jointly	36.7	27.9	29.4	43.0	32.4	34.1	39.8	30.2	31.8
Mother-In-Law	1.1	0.9	0.9	1.2	0.2	0.4	1.1	0.6	0.6
Others in household	1.1		0.2	2.3	0.2	0.5	1.7	0.1	0.4
Jointly with others in household	1.1	1.4	1.3	1.2	2.8	2.6	1.1	2.1	1.9
Head of household		1.1	0.9	2.3	0.7	0.9	1.1	0.9	0.9
Not Applicable	12.2	18.9	17.8	11.6	18.7	17.6	11.9	18.8	17.7
N	90	444	534	86	460	546	176	904	1080

2.5.3 Women's Participation in Community Activities

Table 2-34 indicates that overall, about 21 percent of respondent reported that they had participated in any of the community activity. This proportion was more or less similar in both the districts. More rural respondents had participated in any of the community activities than urban respondents in both the districts. Table 2-34 further indicates that about 27 percent of those respondents who never participated in any of the community activity showed their willingness to participate in any of the activities. As can be observed only a few of the respondents reported that their husbands are not in favour of their participation in the community activities.

Table 2-34: Women's Participation in community activities and awareness about different activities taking place in their community

(in percentage)

Details	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Whether participate in any community activities (Base: All ever-married women aged 15-49 yrs)									
Yes	14.4	22.5	21.2	11.6	23.5	21.6	13.1	23.0	21.4
No	85.6	77.5	78.8	88.4	76.5	78.4	86.9	77.0	78.6
N	90	444	534	86	460	546	176	904	1080
Whether willing to participate in any community activities (Base: Those ever married women aged 15-49 yrs not participating in any community activities)									
Yes	31.2	28.8	29.2	21.1	26.1	25.2	26.1	27.4	27.2
No	62.3	64.2	63.9	77.6	62.2	65.0	69.9	63.2	64.4
My Husband will not allow	5.2	1.2	1.9		1.7	1.4	2.6	1.4	1.6
Don't know	1.3	5.8	5.0	1.3	9.9	8.4	1.3	7.9	6.7
N	77	344	421	76	352	428	153	696	849

In order to know about the different health activities taking place in community, information was collected on immunization campaigns, home visits by health worker, distribution of contraception/medicines, group talks/songs/drama etc on health issues, camp and audio-visual program from all selected ever-married women dwelling in rural and urban areas of Tikamgarh and Damoh. This information is presented in Table 2-35. The table reveals that almost all the eligible women in both the districts reported that the immunization campaigns held in their community. As high as about 54 percent of respondents in Tikamgarh reported that health workers had visited their homes as compared to 47 percent in Damoh. Relatively a high proportion of rural respondents reported home visit of health worker than respondents residing in urban areas in Tikamgarh as well as Damoh. About 20 percent of respondents in both the districts reported that distribution of contraceptives /medicines took place in their community. The corresponding cases were reported to be similar in rural as well as urban respondents in Tikamgarh. But no such case was reported from the urban areas of Damoh. A very less proportion of respondents, ranging from about 4 percent in Damoh to 5 percent in Tikamgarh, reported that group talks/songs/drama/street play/puppet shows were held in their community. About 20 percent to 24 percent of respondents in Damoh and Tikamgarh reported that a camp was organized in their community. This proportion was slightly high for urban areas than rural areas in Tikamgarh but no such case reported from the urban areas of Damoh. A very few respondents in both the districts reported that audio-visual program took place in their community. It is clear that in both the districts, major activity taking place in the community was immunization campaign followed by home visits by health worker and camp. (Table 2-35).

Table 2-35: Awareness about different activities taking place in community

(in percentage)

Details	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Immunisation Campaigns (Base: All ever-married women aged 15-49 yrs)									
Yes	96.7	95.3	95.5	97.7	98.7	98.5	97.2	97.0	97.0
No	3.3	4.1	3.9	1.2	1.3	1.3	2.3	2.7	2.6
Don't know		0.7	0.6	1.2		0.2	0.6	0.3	0.4
Home Visits (Base: All ever-married women aged 15-49 yrs)									
Yes	38.9	56.8	53.7		55.7	46.9	19.9	56.2	50.3
No	60.0	41.2	44.4	98.8	43.5	52.2	79.0	42.4	48.3
Don't know	1.1	2.0	1.9	1.2	0.9	0.9	1.1	1.4	1.4
Distribution of contraceptives/medicines (Base: All ever-married women aged 15-49 yrs)									
Yes	22.2	19.8	20.2		22.8	19.2	11.4	21.3	19.7
No	76.7	70.7	71.7	98.8	68.5	73.3	87.5	69.6	72.5
Don't know	1.1	9.5	8.1	1.2	8.7	7.5	1.1	9.1	7.8
Group Talks/Songs/Drama/Street Play/Puppet (Base: All ever-married women aged 15-49 yrs)									
Yes	2.2	5.9	5.2		4.6	3.8	1.1	5.2	4.5
No	86.7	78.6	80.0	98.8	80.7	83.5	92.6	79.6	81.8
Don't know	11.1	15.5	14.8	1.2	14.8	12.6	6.3	15.2	13.7
Camp (Base: All ever-married women aged 15-49 yrs)									
Yes	30	23.2	24.3		23.7	20.0	15.3	23.5	22.1
No	53.3	66.2	64.0	98.8	66.3	71.4	75.6	66.3	67.8
Don't know	16.7	10.6	11.6	1.2	10.0	8.6	9.1	10.3	10.1
Audio Visual Programme (Base: All ever-married women aged 15-49 yrs)									
Yes	1.1	1.8	1.7		0.4	0.4	0.6	1.1	1.0
No	71.1	66.9	67.6	98.8	72.2	76.4	84.7	69.6	72.0
Don't know	27.8	31.3	30.7	1.2	27.4	23.3	14.8	29.3	26.9
Other (Base: All ever-married women aged 15-49 yrs)									
Yes		2.7	2.2		1.5	1.3		2.1	1.8
No	54.4	60.1	59.2	98.8	56.5	63.2	76.1	58.3	61.2
Don't know	45.6	37.2	38.6	1.2	42.0	35.5	23.9	39.6	37.0
N	90	444	534	86	460	546	176	904	1080

Table 2-36 further indicates whether women participated in any of the health-related activities, which were held in their community, if yes, type of health activities participated. Data presented in Table 2-36 further reveals that about 12 percent of the respondents in both the districts had participated in any of the health activities that took place in their community. The main activity in which they participated was immunization campaign, reported by 84 percent in Tikamgarh and 89 percent in Damoh. Followed by home visits (27 percent in Tikamgarh and 18 percent in Damoh). A very few cases reported the 'other cases'. About 8 percent to 11 percent in Damoh and Tikamgarh reported they were aware of any women development group of their community. About 57 percent of women in Tikamgarh as against 52 percent in Damoh reported that they participated in women development group of their community.

Information on women's need to have training program in order to improve their situation, if yes, type of training required and whether respondent would be allowed to participate in training are presented in Table 2-36. The table delineates that a large proportion of respondents, about 80 percent in Tikamgarh and 77 percent in Damoh, reported that they would like to have training in order to improve their condition and also to earn money. About 40 percent to 46 percent of those who would like to have training wanted to be trained in embroidery, weaving, stitching etc. Followed by any other income generating training, as reported by 41 percent in Tikamgarh and 38 percent in Damoh. Almost all the women in both the districts reported that they would get permission for participating in training. The proportion was more or less similar for rural as well as urban areas of both the districts.

Table 2-36: Women's Participation in different community activities and type of training required

(in percentage)

Details	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Participation in Any health activity (Base: All ever-married women aged 15-49 yrs)									
Yes	6.7	13.7	12.5		12.4	10.4	3.4	13.1	11.5
No	93.3	86.3	87.5	100.0	87.6	89.6	96.6	86.9	88.5
N	90	444	534	86	460	546	176	904	1080
Type of health activities participated (Base: Those participated in any health activities)									
Immunisation Campaign	83.3	83.6	83.6		89.5	89.5	83.3	86.4	86.3
Home Visits	16.7	27.9	26.9		17.5	17.5	16.7	22.9	22.6
Distribution of Medicines/Contraception		4.9	4.5		5.3	5.3		5.1	4.8
Others	16.7	1.6	3.0				16.7	0.8	1.6
N	6	61	67		57	57	6	118	124
Aware of any women's development group (Base: All ever-married women aged 15-49 yrs)									
Yes	8.9	11.9	11.4		9.6	8.1	4.5	10.7	9.7
No	91.1	88.1	88.6	100.0	90.4	91.9	95.5	89.3	90.3
N	90	444	534	86	460	546	176	904	1080
Whether participated in any women development group (Base: Those aware of women development group)									
Yes	75.0	54.7	57.4		52.3	52.3	75.0	53.6	55.2
No	25.0	45.3	42.6		47.7	47.7	25.0	46.4	44.8
N	8	53	61		44	44	8	97	105
Whether willing to receive any kind of training to improve their situation or earn an income (Base: All ever married women aged 15-49 years)									
Yes	80.0	80.0	80.0	66.3	79.1	77.1	73.3	79.5	78.5
No	18.9	19.4	19.3	31.4	20.7	22.3	25.0	20.0	20.8
Don't know	1.1	0.7	0.7	2.3	0.2	0.5	1.7	0.4	0.6
N	90	444	534	86	460	546	176	904	1080
Type of training willing to receive (Base: Those ever married women aged 15-49 years willing to receive any type of training)									
Agriculture training	1.4	13.2	11.2	1.8	6.3	5.7	1.6	9.7	8.5
Confection	45.8	38.6	39.8	43.9	46.2	45.8	45.0	42.4	42.8
Adult literacy	8.3	2.8	3.7	3.5	6.0	5.7	6.2	4.5	4.7
Any other income generation training	44.4	40.0	40.7	49.1	36.3	38.0	46.5	38.1	39.4
Others		4.2	3.5	1.8	5.2	4.8	0.8	4.7	4.1
Don't know		1.1	0.9					0.6	0.5
Whether allowed to participate in the training (Base: Those ever married women aged 15-49 years willing to receive any type of training)									
Yes	94.4	95.8	95.6	98.2	99.5	99.3	96.1	97.6	97.4
No	1.4	3.1	2.8	1.8	0.3	0.5	1.6	1.7	1.7
Don't know	4.2	1.1	1.6		0.3	0.2	2.3	0.7	0.9
N	72	355	427	57	364	421	129	719	848

2.6 HEALTH SEEKING BEHAVIOR

This chapter makes an attempt to apprehend the awareness level of ever-married women about the nearest government health facility and accessibility of nearest government health facility from their home, as the most basic determinant of health service utilization is knowledge of the location of nearest facility. It also focuses on the reasons for visiting and not visiting the health facility, liking and disliking about the visited health facility, availability of Dai and JSR and, opinion of respondents about the best place or person for delivering child. It further discusses about the awareness of respondents about the place or person to be approached for antenatal care, immunization of child, for the treatment of minor and major illness of herself, man in the households, girl and child under 5 years of age and difficulties faced by them at the time of visiting health facility for the treatment of major illness. Places or persons approached for the

treatment of boy and girl under 5 years of age when suffered last from any minor or major illness, home visit by health care provider, trusted person for providing information about health and also most trusted channel are also being presented in this chapter. Finally, this chapter focuses on the respondent's willingness to pay fees for health care services if government charges it for the improvement of the quality of care.

2.6.1 Awareness and Accessibility of government health facilities

Information on the awareness of nearest government health facilities, type of these facilities, time taken to reach the nearest government health facilities and distance between nearest facilities and home was collected from all the selected ever-married women and is presented in Table 2-37. The table reveals that as high as 95 percent of respondents in Damoh reported to be aware of the nearest government health facility as compared to 88 percent in Tikamgarh. All the urban respondents as against 86 percent of rural respondents in Tikamgarh reported to know the nearest government health facility. But about 93 percent of respondents in urban areas and more or less similar proportion in rural areas reported the same in Damoh. People generally seek services in the facility closest to their homes, and the government's health system for rural areas is premised on the population's seeking services first at the sub-centre, then at higher levels. Interestingly the findings of the survey, as can be seen in Table 2-37, revealed that PHC came out to be most commonly known nearest government health facility, as reported by 65 percent of respondents in Tikamgarh and 46 percent in Damoh. Only 22 percent of the rural respondents in Tikamgarh and 39 percent in Damoh stated the sub-centre being the nearest facility. This might be due to the fact that many of the sub-centres in these districts were not having its own building and in most of the cases the ANM and MPW (M) visited the clients to their houses. The other known nearest government health facilities were District Hospital (21% in Damoh and 16% in Tikamgarh). The remaining health facilities like civil hospital, UFWC etc were reported by less than 2 percent of respondents in both the districts. Women and men in urban areas, where there are no sub-centres, mentioned the PHC and District Hospital as the nearest health facility.

In order to understand the accessibility of government health facilities, two questions were addressed to all selected ever-married women, 'how long does it take to travel from your home to this facility' and 'how far from your home is this facility'. In response to the time spent in travelling to nearest health facility from home, about 30 percent to 34 percent of respondents in Tikamgarh and Damoh reported to spend between 16 minutes to 30 minutes of time in travelling to nearest government facilities from home. This proportion was higher for urban areas (40% both in Tikamgarh & Damoh) than rural areas (27% in Tikamgarh & 32% in Damoh). About 30 percent of respondents in Tikamgarh and 24 percent of respondents in Damoh had reportedly spent about half an hour to one hour in travelling to nearest government health facilities. This proportion was relatively high for rural areas (36% in Tikamgarh & 28% in Damoh) as compared to urban areas (8% in Tikamgarh & 6% in Damoh). Average time spent in travelling from home to nearest facility was worked out as about 33 minutes in Tikamgarh and 30 minutes in Damoh. As expected, respondents dwelling in urban areas reported to be spending relatively less time in travelling to nearest government health facility as compared to those respondents who reside in rural areas. (Table 2-37)

In response to the distance between nearest health facility and home, about 28 percent to 30 percent of respondents in Damoh and Tikamgarh reported that nearest health facility was between 2 km to 5 km from their house. This proportion was higher for rural areas than urban areas in both the districts. About 26 percent of the respondents in Damoh and about 22 percent in Tikamgarh reported distance of nearest health facility from home was more than 6 km or more. A significantly high proportion of respondents from rural areas of both the districts reported the same as compared to urban areas. A large majority of respondents in urban areas of both the districts, about 93 percent in Damoh & about 90 percent in Tikamgarh, reported that the distance between home and nearest government health facility was less than 2 km. But only a small proportion of respondents in rural areas, ranging between 36 percent to 38 percent, reported the same in both the districts. Average distance between nearest government health facility and home was worked out as 5.8 km in Tikamgarh and 5.4 km in Damoh. Mean distance of nearest government health facility from home was relatively higher in rural areas than urban areas in both

the districts. This indicates that availability of government health facilities is more pronounced, as expected, in urban areas than rural areas. (Table 2-37)

Table 2-37: Awareness and accessibility of government health facilities

(in percentage)

Details	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
Whether aware of nearest government health facility (Base: All ever-married women aged 15-49 yrs)									
Yes	100.0	85.8	88.2	94.2	95.4	95.2	97.2	90.7	91.8
No		14.2	11.8	5.8	4.6	4.8	2.8	9.3	8.2
N	90	444	534	86	460	546	176	904	1080
Type of this government health facility (Base: Those ever married women aged 15-49 years aware of government health facility)									
SC		21.5	17.4		39.0	32.9		30.9	25.5
PHC	52.2	67.5	64.5	28.4	48.7	45.6	40.9	57.4	54.6
District Hospital	43.3	9.4	15.9	71.6	11.6	21.0	56.7	10.6	18.6
Civil Hospital		1.0	0.8					0.5	0.4
UFWC	3.3		0.6				1.8		0.3
Don't know	1.1	0.5	0.6		0.7	0.6	0.6	0.6	0.6
N	90	381	471	81	439	520	171	820	991
Time spent in travelling to facility from home (in minutes)									
(Base: Those ever married women aged 15-49 years aware of government health facility)									
<5		1.6	1.2	1.4	3.1	2.8	0.6	2.4	2.1
5-10	29.9	17.8	20.3	20.8	21.0	21.0	25.8	19.5	20.7
11-15	20.7	12.1	14.0	29.2	13.2	15.7	24.5	12.7	14.9
16-30	40.2	27.4	30.1	40.3	32.4	33.6	40.3	30.1	32.0
31-60	8.0	36.4	30.4	5.6	27.7	24.2	6.9	31.7	27.1
60+	1.1	4.4	3.7	2.8	2.3	2.4	1.9	3.3	3.0
Mean	22.4	35.7	32.9	23.1	31.1	29.8	22.7	33.2	31.3
Distance between the nearest facility and home									
(Base: Those ever married women aged 15-49 years aware of government health facility)									
<1	27.9	20.9	22.4	23.7	26.0	25.7	26.2	23.6	24.0
1-2	62.8	14.7	24.9	69.5	12.1	20.5	65.5	13.4	22.7
2-3	8.1	29.7	25.1	3.4	17.1	15.1	6.2	23.1	20.1
4-5		6.6	5.2		14.7	12.6		10.8	8.9
6+	1.2	27.5	21.9	3.4	30.1	26.2	2.1	28.8	24.0
N	86	320	406	59	346	405	145	666	811
Mean	1.7	6.9	5.8	2.1	5.9	5.4	1.9	6.4	5.6

The distribution of time spent in travel to facilities from home and distance between nearest facility and home by each health facility across both the districts is given in Table 2-38. The cross tabulation analysis shows that about 54 percent of the respondents reported to spend 10 minutes or less in travelling to sub-centre (SC) from home as against about 48 percent reported the same in Damoh. More than 10 minutes to half an hour of time reported to be spent by about 38 percent of respondents in Damoh and 31 percent in Tikamgarh in travelling to SC from home. Average time spent in travelling to SC from home in Tikamgarh was worked out as 20.4 minutes and more or less same time reported to be spent by the respondents in Damoh (21.2 minutes). About 55 percent of respondents in Damoh had spent more than 10 minutes to half an hour of time in travelling to PHC from home as against 45 percent in Tikamgarh. About 38 percent of the respondents in both the districts reported to spend more than half hours of time in travelling to PHC from home and remaining had spent 10 minutes or less. On an average about 37.2 minutes of time had taken by the respondents dwelling in Damoh in travelling to PHC from home compared to about 34.7 minutes for the respondents of Tikamgarh. Table 2-38 further reveals that about 58 percent of respondents in both the districts reportedly spending more than 10 minutes to half an hour of time in travelling to district hospital from home. About 20 percent of respondents in Damoh had reported to spend 10 minutes or less in travelling to district hospital from home and none of the respondent had reported the same in Tikamgarh. Average time spent in travelling to district hospital from home was higher in Tikamgarh (41.5 minutes) than Damoh (28.2) minutes).

The cross tabulation analysis, presented in Table 2-38, further reveals that about 80 percent of the respondents in Tikamgarh reported that distance of SC from their home was less than 2 km as against 74 percent of respondents reported the same in Damoh. About 4 to 6 percent of respondents in Tikamgarh as well as in Damoh had reported that the distance between SC and home was 6 km or more. Average distance between SC and home was worked out to be 1.8 km for Damoh and 1.2 km for Tikamgarh. About 37 percent of respondents in Tikamgarh and 20 percent in Damoh had reported that the distance of PHC from their home was less than 2 km. About 41 percent of respondents in Damoh reported that the distance between PHC and home was in between 2 km to 5 km as compared to 35 percent of respondents reporting the same in Tikamgarh. Average distance of PHC from home was relatively high in Damoh (38.3 km) than Tikamgarh (29 km). About 48 percent of respondents in both the districts reported that district hospital was at a distance of less than 2 km from their home. The proportion of respondents reporting district hospital to be at a distance of 6 km or more was higher in Damoh (38%) than Tikamgarh (16%). Average distance of district hospital from home was higher in Damoh (7.4 km) than Tikamgarh (5.5km).

Table 2-38: Distance and time taken to access nearest facility by Health Facility

	TIKAMGARH							DAMOH				
	SC	PHC	DH	CH	UFWC	Don't know	TOTAL	SC	PHC	DH	CH	TOTAL
Time spent in travel to facility from home (in minutes)												
< 5	3.8	0.8					1.2	1.9	1.5	6.0	33.3	2.8
5-10	50.0	16.2			33.3	33.3	20.3	46.1	5.5	14.0		21.0
11-15	5.1	16.5	13.3			66.7	14.0	12.3	14.9	23.0		15.7
16-30	25.6	28.5	45.0			66.7	30.1	25.3	39.8	34.0	33.3	33.6
31-60	14.1	33.8	35.0	100.0			30.4	13.0	33.8	22.0	33.3	24.2
60+	1.3	3.8	6.7				3.7	1.3	4.0	1.0		2.4
Don't know		0.4					0.2		0.5			0.2
Total	78	260	60	4	3	3	408	154	201	100	3	458
Avg.	20.4	34.7	41.5	56.3	11.7	20.0	32.9	21.2	37.2	28.2	30.3	29.8
Distance between nearest facility & Home (in km.)												
< 1	57.9	17.0	3.3			33.3	22.4	57.5	8.6	6.3		25.7
1-2	22.4	20.5	44.3		100.0	33.3	24.9	16.4	11.7	42.1		20.5
3-4	11.8	27.0	31.1	100.0			25.1	13.7	16.7	14.7		15.1
5-6	3.9	5.8	4.9				5.2	6.2	24.7	2.1		12.6
6+	3.9	29.0	16.4			33.3	21.9	6.2	38.3	34.7	100.0	26.2
Don't know		0.8					0.5					
Total	76	259	61	4	3	3	406	146	162	95	2	405
Avg.	1.2	7.4	5.5	3.3	1	2.7	5.8	1.8	7.3	7.4	12.0	5.4

2.6.2 Ever visited facility and transport used to reach the facility

Table 2-39 reveals that a large majority of respondents, ranging between 83 percent in Damoh to 87 percent in Tikamgarh, had reported to ever visit the nearest government health facility. The corresponding proportion was slightly high for rural areas than urban areas in Damoh district. In response to a question on type of transport used generally for visiting the nearest government health facility, slightly more than half of the respondents who ever visited health facility in both the districts reported that generally they had not used any transport facility for getting to nearest health facility. About 31 percent of such respondents had used public transport for going to health facility in Damoh as against 20 percent of respondents in Tikamgarh. This proportion of using public transport was relatively high for rural areas than urban areas in both the districts. About 15 percent to 19 percent of respondents in Damoh and Tikamgarh reported to be using bicycle or motor cycle for visiting the health facility.

Table 2-39: Ever visited the facility and transport used to reach the facility (in percentage)

Details	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Whether ever visited the government health facility (Base: All ever-married women aged 15-49 yrs)									
Yes	87.8	86.4	86.6	81.5	83.1	82.9	84.8	84.6	84.7
No	12.2	13.6	13.4	18.5	16.9	17.1	15.2	15.4	15.3
N	90	381	471	81	439	520	171	820	991
Transport used to visit the facility (Base: Those ever-married women aged 15-49 years ever visited the health facility)									
By foot	69.6	48.9	52.9	63.6	49.3	51.5	66.9	49.1	52.2
Bicycle/motor cycle	15.2	20.4	19.4	30.3	11.8	14.6	22.1	15.9	16.9
Public transport	11.4	22.2	20.1	6.1	35.1	30.6	9.0	29.0	25.5
Borrowed public transport	2.5	4.0	3.7		0.8	0.7	1.4	2.3	2.1
Bullock cart		2.1	1.7		1.4	1.2		1.7	1.4
Tractor	1.3	0.6	0.7		0.8	0.7	0.7	0.7	0.7
Others		1.8	1.5		0.8	0.7		1.3	1.1
N	79	329	408	66	365	431	145	694	839

Cross tabulation analysis of ever visited this facility and transport used to reach the facility by type of nearest health facility, presented in Table 2-40, shows that majority of the respondents who knew about the nearest health facility had visited these facilities. About 79 percent of the respondents who visited SC had reportedly not used any transport for going to this facility in Tikamgarh as compared to 73 percent in Damoh. The transport facility used for going to SC were bicycle/motor cycle (16% in Tikamgarh & 8% in Damoh) and public transport (5% in Tikamgarh & 19% in Damoh). About half of the respondents who ever visited PHC reportedly did not use any transport for visiting the PHC in both the districts. Transports used for visiting PHCs were mainly bicycle or motorcycle (19% in Tikamgarh & 12% in Damoh), public transport (35% in Tikamgarh and 30% in Damoh). Borrowed private transport, bullock cart, and tractor were used for visiting PHC reportedly by 1 percent to 3 percent of respondents in both the districts. About 30 percent of respondent who ever visited district hospital had never used any transport for visiting this health facility. Transports used for visiting district hospital were mainly public transport (30% in Tikamgarh and 34 percent in Damoh) and bicycle or motorcycle (23% in Tikamgarh and 30% in Damoh). Borrowed private transport was used for visiting district hospital by 7 percent of respondents in Tikamgarh and 3 percent in Damoh. Other transports like bullock cart, tractor was reportedly used by less than one percent of respondent in both the districts for visiting district hospitals.

In order to know whether ANM visited respondents for postpartum care of child, a question 'How old was your last baby when an ANM/MPW visited you first time in your home' was addressed to all ever-married women who had at least one living child and reside in rural areas. Further to collect information whether ANM performed abdominal examination during last pregnancy even when there was no complication, all ever married women having at least one living child were asked a question 'Did the ANM perform an abdominal examination during last pregnancy if your pregnancy was doing well?' This information is presented in Table 2-41.

The table reveals that about 59 percent to 54 percent of respondents having at least one living child reported that ANM/MPW did not visit them at their home for the check-up or care of their child in rural areas of Tikamgarh as well as Damoh. About 16 percent of such respondents in Damoh and Tikamgarh reported that ANM visited first time to their home when their child was less than 2 months old. Overall, a less proportion of women, ranging from 27 percent in Tikamgarh to 32 percent in Damoh, reported the visit of ANM

Table 2-40: Ever visited facility and transport generally used to visit by Health Facility
(in percentage)

Type of transport	TIKAMGARH							DAMOH				
	Type of facility							Type of facility				
	SC	PHC	DH	CH	UFWC	DK	TOTAL	SC	PHC	DH	CS	TOTAL
Have you ever visited this facility												
Yes	75.6	87.8	92.0	100.0	100.0	100.0	86.6	73.1	89.0	84.4	100.0	82.9
No	24.4	12.2	8.0				13.4	26.9	11.0	15.6		17.1
Total N	82	304	75	4	3	3	471	171	237	109	3	520
What transport do you generally use to get there												
By foot	79.0	50.6	36.2	75.0	66.7	66.7	52.9	72.8	48.8	30.4		51.5
Bicycle/motor cycle	16.1	19.1	23.2	25.0	33.3		19.4	8.0	11.8	30.4		14.6
Public transport	4.8	21.7	30.4				20.1	19.2	35.1	33.7	100.0	30.6
Borrowed private transport		3.4	7.2			33.3	3.7			3.3		0.7
Bullock cart		2.6					1.7		2.4			1.2
Tractor		0.7	1.4				0.7		0.9	1.1		0.7
Other		1.9	1.4				1.5		0.9	1.1		0.7
Total N	62	267	69	4	3	3	408	125	211	92	3	431

to their home for the check-up of their child after the delivery. Table 2-41 further shows that the proportion of women reporting abdominal check-up even when there was no complication by ANM was slightly higher in the rural areas of Damoh (26%) than Tikamgarh (19%). But a low proportion of women in the rural areas of both the districts reported that ANM performed abdominal check-up during normal pregnancy.

Table 2-41: Age of the last baby at first visit of ANM/MPW at home and abdominal check-up ANM during last pregnancy

Details	(in percentage)		
	Tikamgarh (Rural Area)	Damoh (Rural Area)	Combined (Rural Areas)
Age of the last baby at first visit of ANM/MPW at Home (Base: Those ever-married women aged 15-49 years who have at least on living child)			
Less than one week	3.5	4.6	4.1
Less than two months	15.0	14.8	14.9
Less than three months	4.8	4.1	4.4
Less than six months	3.8	8.2	6.0
Did not visit	58.5	53.5	56.0
Don't remember	10.8	12.8	11.8
Not Applicable	3.8	1.9	2.8
Whether ANM performed an abdominal examination during last pregnancy even if it was a normal delivery (Base: Those ever-married women aged 15-49 years who have at least on living child)			
Yes	18.5	25.9	22.3
No	75.0	62.0	68.4
Do not remember	5.0	10.9	8.0
Not applicable	1.5	1.2	1.4
N	400	413	813

2.6.3 Reasons for visiting and not visiting nearest health facility

This section detail out the reasons for which respondents had ever visited the nearest government health facility. It further gives information on the reasons due to which respondents never visited the nearest government health facility. This information is presented in Table 2-42. Finally, it gives distribution of reasons for visiting and not visiting health facility by type of nearest health facility, presented in Table 2-43.

Table 6.4 indicates that 'adult female illness' reported to be one of the major reason for visiting the health facility, as reported by around 65 percent of respondents who ever visited the health facility in Tikamgarh and about 58 percent in Damoh. About 62 percent of respondents who ever

visited the health facility gave 'child illness' as the reason for visiting the health facility in both the districts. The other reasons for visiting the facility were mainly 'adult male illness' (24 percent in Tikamgarh & 22 percent in Damoh), family planning (17% in Damoh & 11% in Tikamgarh) and immunisation (11% in both the districts). Table 6.4 indicates that about 28 percent to 40 percent of respondents who never visited any health facility reported to do so because there was no illness in their family in Damoh as well as Tikamgarh. About 26 percent of the respondents who never visited the facility gave 'poor quality of care' as the reason for not visiting the nearest health facility in Damoh compared to 14 percent in Tikamgarh. The other reasons for not visiting the health facility were 'non availability of doctor' (about 14% in both the districts), 'health facilities did not have medicines' (15% in Damoh & 13% in Tikamgarh) and 'prefer private clinic or doctor' (11% in Damoh & 8% in Tikamgarh).

In focus groups both the men and women participants stressed that economic reasons dominate in the selection of a provider. While for the poorer section the cost of treatment is major factor in deciding a provider or facility for the better off families it is the quality of care rather than cost that matters most. Other important factors are distance, availability of medicines, and the provider's skill and behaviour.

Table 2-42: Reasons for visiting and not visiting the health facility

Details	District						(In percentage)		
	Tikamgarh			Damoh			Combined		
	Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
Reasons for visiting government health facility* (Base: Those ever-married women aged 15-49 yrs ever visited health facility)									
Adult female illness	67.1	64.7	65.2	75.8	54.5	57.8	71.0	59.4	61.4
Adult male illness	24.1	24.0	24.0	40.9	18.1	21.6	31.7	20.9	22.8
Child illness	63.3	62.6	62.7	59.1	62.2	61.7	61.4	62.4	62.2
Family Planning	12.7	10.9	11.3	27.3	14.8	16.7	19.3	13.0	14.1
Immunisation	13.9	10.9	11.5	7.6	12.1	11.4	11.0	11.5	11.4
Prenatal Care	7.6	3.6	4.4	3.0	10.7	9.5	5.5	7.3	7.0
Delivery	2.5	2.4	2.5			2.7	2.3	2.6	2.4
Other		0.6	0.5		0.8	0.7		0.7	0.6
N	79	329	408	66	365	431	145	694	839
Reason for not visiting the health facility* (Base: Those ever-married women 15-49 years who never visited any health facility)									
No illness	63.6	34.6	39.7	20.0	29.7	28.1	38.5	31.7	32.9
Too far		11.5	9.5	13.3	2.7	4.5	7.7	6.3	6.6
Too dear/fees too high		1.9	1.6		1.4	1.1		1.6	1.3
Prefer other provider	9.1		1.6	40.0	8.1	13.5	26.9	4.8	8.6
Poor quality of care	27.3	11.5	14.3	46.7	21.6	25.8	38.5	17.5	21.1
Unfriendly providers		7.7	6.3	6.7		1.1	3.8	3.2	3.3
They do not have medicines	9.1	13.5	12.7		17.6	14.6	3.8	15.9	13.8
Prefer private clinic/doctor	9.1	7.7	7.9		13.5	11.2	3.8	11.1	9.9
No doctor		17.3	14.3	20.0	13.5	14.6	11.5	15.1	14.5
Inconvenient place		1.9	1.6		1.4	1.1		1.6	1.3
Others		15.4	12.7	6.7	13.5	12.4	3.8	14.3	12.5
N	11	52	63	15	74	89	26	126	152

Note: * Percentages are not added to 100, as it was a multiple response question

Cross tabulation analysis of reasons for visiting and not visiting the health facility by type of health facility, presented in Table 2-43, shows that the major reasons for visiting the sub center (SC) were 'adult female illness' (65% in Tikamgarh & 51% in Damoh) and 'child illness' (66% in Tikamgarh and 61% in Damoh). The other reasons for visiting SC were mainly 'adult male illness' (29% in Tikamgarh and 14% in Damoh) and 'immunisation' (22% in Damoh and 18% in Tikamgarh). About 55 percent to 63 percent of respondents reported 'adult female illness' as one of the major reason for visiting the PHC. The other major reason for visiting the PHC was 'child illness' as reported by about 64 percent of respondents in both the districts. The other reasons were 'adult male illness' (21% in Damoh and 19% in Tikamgarh), Family Planning (18% in Damoh

& 13% in Tikamgarh) and 'immunisation' (12% in Tikamgarh and 8% in Damoh). About 71 to 73 percent of respondents reported that they visited district hospital due to the illness of adult female. 'Child illness' reported to be major illness for visiting district hospital as reported by 57 percent of respondents who ever visited the district hospital in both the districts. Followed by 'adult male illness' (36% in Tikamgarh and 31% in Damoh) and 'family planning' (26% in Damoh and 10% in Tikamgarh).

Table 2-43: Reasons for visiting and not visiting the health facility by types of facility

Details	Tikamgarh						Damoh			
	SC	PHC	DH	CH	UFWC	Not none	SC	PHC	DH	Not none
Reasons for visiting government health facility* (Base: Those ever-married women aged 15-49 yrs ever visited health facility)										
Adult female illness	64.5	63.3	71.0	100	66.7	66.7	51.2	55.0	72.8	66.7
Adult male illness	29.0	19.1	36.2	100			14.4	21.3	31.5	33.3
Child illness	66.1	63.7	56.5	75.0	33.3	66.7	60.8	64.0	57.6	66.7
Family Planning	3.2	13.5	10.1		33.3		7.2	18.0	26.1	33.3
Immunisation	17.7	12.4	2.9		33.3		22.4	8.1	4.3	
Prenatal Care	6.5	4.5	1.4			33.3	11.2	10.9	4.3	
Delivery		2.6	4.3				2.4	1.4	4.3	
Other		0.7					0.8	0.9		
N	62	267	69	4	3	3	125	211	92	3
Reason for not visiting the health facility* (Base: Those ever-married women 15-49 years who never visited any health facility)										
No illness	30.0	40.5	66.7				39.7	23.9	30.8	35.3
Too far	5.0	10.8	16.7				9.5	2.2	11.5	
Too dear/fees too high		2.7					1.6		3.8	
Prefer other provider		2.7					1.6	10.9		41.2
Poor quality of care	15.0	13.5	16.7				14.3	21.7	19.2	47.1
Unfriendly providers	15.0	2.7					6.3			5.9
They do not have medicines	20.0	10.8					12.7	17.4	15.4	5.9
Prefer private clinic/doctor	10.0	8.1					7.9	17.4	7.7	
No doctor	20.0	13.5					14.3	17.4	11.5	11.8
Inconvenient place	5.0						1.6	2.2		
Others	15.0	13.5					12.7	13.0	11.5	11.8
N	20	37	6				63	46	26	17

2.6.4 Reasons for liking and disliking the visited health facility

In order to have a better utilisation of health facilities, it is important to know what attributes of health facility respondents like and also what are the things which respondents do not like about the visited health facility. This information was collected from the respondents who ever visited the health facility and are presented in Table 2-44.

Table 2-44 indicates that slightly more than half of the respondents who ever visited the health facility reported that they liked the friendly behaviour of staff in both the districts. Other reasons for liking the visited health facility were availability of medicines and other health services at low or no cost (37% in Tikamgarh & 33% in Damoh), 'they give medicines' (about 34% in both the districts) and 'good quality of care' (26% in Damoh and 21% in Tikamgarh). Table 2-44 further indicates that about 41 percent to 45 percent of respondents in Damoh as well as Tikamgarh reported that they did not like the visited health facility because of the shortage of medicines. The other reasons for not liking the visited health facility were 'poor facilities' (40% in Damoh and 33% in Tikamgarh) and 'poor quality of care' (29% in Damoh and 28% in Tikamgarh).

Table 2-44: Reasons for liking and disliking the visited health facility

Reasons	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Reasons for liking the visited health facility* (Base: Those who ever visited health facility)									
Friendly Staff	51.9	52.0	52.0	54.5	49.6	50.3	53.1	50.7	51.1
They give her medicines	29.1	34.7	33.6	22.7	35.9	33.9	26.2	35.3	33.7
Quality of Care	15.2	22.8	21.3	19.7	27.4	26.2	17.2	25.2	23.8
Cleanliness	11.4	15.5	14.7	15.2	19.7	19.0	13.1	17.7	16.9
Low/no cost	39.2	36.5	37.0	27.3	34.5	33.4	33.8	35.4	35.2
Other		2.7	2.2	15.2		2.3	6.9	1.3	2.3
Reasons for disliking the visited health facility* (Base: Those who ever visited health facility)									
Unfriendly staff	13.9	12.8	13.0	15.2	8.5	9.5	14.5	10.5	11.2
Lack of medicines	51.9	43.2	44.9	56.1	38.4	41.1	53.8	40.6	42.9
Poor quality of care	30.4	26.7	27.5	47.0	26.0	29.2	37.9	26.4	28.4
Poor facilities	35.4	32.8	33.3	43.9	39.7	40.4	39.3	36.5	36.9
Staff frequently absent	11.4	7.6	8.3	6.1	5.5	5.6	9.0	6.5	6.9
Dirtiness	41.8	22.5	26.2	12.1	20.8	19.5	28.3	21.6	22.8
Others	1.3	11.9	9.8	9.1	6.3	6.7	4.8	8.9	8.2
N	79	329	408	66	365	431	145	694	839

Note: * Percentages are not added to 100, as it was a multiple response question

2.6.5 Awareness and Accessibility of nearest PHC

Information on awareness and accessibility of nearest PHC was only collected from those respondents who dwell in rural areas and had reported sub-centre (SC), as the nearest government health facility and is presented in Table 2-45.

The table reveals that about 82 percent to 84 percent of respondents who are aware of SC and lived in rural areas reported to be knowing of PHC in Tikamgarh as well as Damoh. In order to know the accessibility of the PHC, two information one on the time spent in travelling and secondly, distance between nearest PHC and home was collected. It was found that about 17 percent to 38 percent of respondents who stayed in rural areas and reported to have SC as nearest health facility reported to spend less than 5 minutes of time in travelling to nearest PHC from home. About 52 percent of such respondents in Tikamgarh and 42 percent of respondents in Damoh had reportedly spent more than 25 minutes of time in travelling to nearest health.

In response to the distance between nearest health facility and home, about 52 percent in Damoh and 47 percent of respondents in Tikamgarh reported that nearest PHC was more than 5 km from their house. About 37 percent of the respondents in Damoh and about 17 percent in Tikamgarh reported distance of nearest health facility from home was less than 1 km. (Table 2-45)

Table 2-45: Awareness and accessibility of nearest PHC

Details	(in percentage)		
	Tikamgarh (Rural Area)	Damoh (Rural Area)	Combined (Rural Areas)
Whether aware of nearest PHC (Base: All ever-married women aged 15-49 yrs reported SC as the nearest govt. health facility)			
Yes	81.7	83.6	83.0
No	8.3	6.4	7.0
N	82	171	253
Time spent in travelling to nearest PHC from home (in minutes) (Base: All ever-married women aged 15-49 yrs reported SC as the nearest govt. health facility and aware of PHC)			
<5	16.7	37.5	29.4
5-10	1.5		0.6
11-15	7.6	9.6	8.8
16-25		2.9	1.8
26+	51.5	42.3	45.9
Don't know	22.7	7.7	13.5
Distance between the nearest PHC and home (Base: All ever-married women aged 15-49 yrs reported SC as the nearest govt. health facility and aware of PHC)			
<1	16.7	36.5	28.8
1-2	1.5	1.9	1.8
2-3	3.0	1.0	1.8
4-5	9.1		3.5
6+	47.0	51.9	50.0
Don't know	22.7	8.7	14.1
N	66	104	170

2.6.6 Awareness and Accessibility of nearest District Hospital

Information on awareness and accessibility of nearest district hospital was only collected from those respondents who had reported either sub-centre (SC) or PHC or UFWC or PPC as the nearest government health facility and is presented in Table 2-46.

The table reveals that about 54 percent to 63 percent of respondents who were aware of SC, PHC, UFWC, PPC reported to be aware of district hospital in Tikamgarh as well as Damoh. In response to the time spent in travelling from home to district hospital, about 7 percent of respondents who knew district hospital as their nearest health facility in Tikamgarh to about 12 percent of such respondents in Damoh had reported to spend less than 5 minutes of time in travelling to district hospital from their home. This proportion was significantly higher for urban areas than rural areas in both the districts. About 78 percent of such respondents reported to spend more than 25 minutes in visiting district hospital from home in Tikamgarh as against 74 percent in Damoh.

In response to the distance between district hospital and home, about 66 percent to 72 percent of respondents in Damoh and Tikamgarh reported that nearest district hospital was more than 5 km from their house. About 6 percent of the respondents in Tikamgarh and about 11 percent in Damoh reported distance of nearest health facility from home was less than 1 km. The corresponding proportion was relatively high for urban areas than rural areas of both the districts. (Table 2-46)

Table 2-46: Awareness and accessibility of District Hospital

(in percentage)

Details	District						Combined		
	Tikamgarh			Damoh			Urban	Rural	Total
	Urban	Rural	Total	Urban	Rural	Total			
Whether aware of nearest District Hospital (Base: All ever-married women aged 15-49 yrs reported either SC/PHC/UFWC/PPC as the nearest govt. Health facility)									
Yes	58.9	53.3	54.4	39.5	67.4	63.1	49.7	60.9	58.9
No	41.1	46.7	45.6	60.5	32.6	36.9	50.3	39.1	41.1
N	90	381	471	81	439	520	171	820	991
Time spent in travelling to nearest District Hospital from home (in minutes) (Base: All ever-married women aged 15-49 yrs reported either SC/PHC/UFWC/PPC as the nearest govt. Health facility & aware of district hospital)									
<5	26.4	1.5	6.6	75.0	4.7	11.6	44.7	3.4	9.4
5-10				3.1	0.3	0.6	1.2	0.2	0.3
11-15				3.1		0.3	1.2		0.2
16-25		2.0	1.6		0.7	0.6		1.2	1.0
26+	73.6	78.8	77.7	15.6	79.7	73.5	51.8	79.4	75.3
Don't know		17.7	14.1	3.1	14.5	13.4	1.2	15.8	13.7
Distance between the nearest PHC and home (Base: All ever-married women aged 15-49 yrs reported either SC/PHC/UFWC/PPC as the nearest govt. Health facility & aware of district hospital)									
<1	26.4	0.5	5.9	78.1	3.7	11	45.9	2.4	8.7
1-2	1.9	1.5	1.6	3.1	0.7	0.9	2.4	1.0	1.2
2-3	1.9		0.4				1.2		0.2
4-5		2.5	2.0		0.3	0.3		1.2	1.0
6+	69.8	71.9	71.5	15.6	71.6	66.2	49.4	71.7	68.5
Don't know		23.6	18.8	3.1	23.6	21.6	1.2	23.6	20.4
N	53	203	256	32	296	328	85	499	584

2.6.7 Village Health Guide or JSR

A village community selects a volunteer as Village Health Guide who after training acts as a link between the community and the government health system. Each VHG is paid an honorarium of Rs 50/- per month. Information on the availability of village health guide (VHG), ever used their services and opinion of respondents about the importance of VHG was collected from those respondents who reside in rural areas and is presented in Table 2-47.

A small proportion of respondents, ranging 13 percent in Damoh to 16 percent in Tikamgarh, had reported that the VHG was available in their village. About 48 percent of those respondents who reported the availability of VHG had ever availed the services of VHG in both the districts. In response to a question 'Is VHG or JSR an important source of health care for you and your community', about 58 percent of respondents told VHG to be an important source of information for health care for them and their child in Tikamgarh compared to 49 percent of respondents in Damoh.

Table 2-47: Availability of Village Health Guide or JSR in the village, ever used their services and respondent's opinion about Village Health Guide

	(in percentage)		
Details	Tikamgarh (Rural Area)	Damoh (Rural Area)	Combined (Rural Areas)
Whether Village Health Guide (VHG) or JSR available in the village (Base: All ever-married women aged 15-49 yrs)			
Yes	13.3	16.1	14.7
No	69.8	56.3	62.9
Don't know	16.4	27.4	22.0
Not Applicable	0.5	0.2	0.3
N	444	460	904
Whether ever used the services of the Village Health Guide or JSR (Base: Those ever-married women aged 15-49 yrs reported availability of VHG/JSR in their village)			
Yes	47.5	48.6	48.1
No	52.5	51.4	51.9
N	59	74	133
Opinion about the VHG/JSR as an important source of health care (Base: Those ever-married women aged 15-49 yrs reported availability of VHG/JSR in their village)			
Yes	57.6	48.6	52.6
No	28.8	35.1	32.3
Don't know	13.6	16.2	15.0
N	59	74	133

2.6.8 Dai

Large majority of deliveries in the rural areas is conducted by Traditional Birth Attendants called Dais. The programme envisages training all untrained practicing Dais in the rural areas. The Dais is being involved for registration of pregnant women for antenatal care, immunization and also in the propagation of small family norms. Information on availability of Dai in village, whether trained or untrained, preference for trained or untrained Dai and reason for such preferences in the opinion of respondent is presented in Table 2-48

Table 2-48 indicates that more than two-third of the respondents reported that Dai was available in their village in Damoh compared to 57 percent in Tikamgarh. A half of the respondents in both the districts had reported that dais which were available in their village were trained. About 32 percent of respondents in both the districts reported the availability of untrained Dai in their village. Majority of the respondents in both the districts reported to prefer trained Dai for delivering their child (78% in Damoh and 67% in Tikamgarh). Only about 7 percent to 8 percent reported to prefer untrained Dai for delivery in Tikamgarh as well as Damoh. Remaining of the respondents in both the districts did not give any opinion about the preference of trained or untrained Dai.

About 60 percent of respondents in Damoh who preferred to use trained Dai had reported to do so because they used sterile razor to cut cord as against 54 percent in Tikamgarh. Other reasons for preferring trained Dai were 'more skilled' (44% in Damoh and 39% in Tikamgarh) and 'other people say she is better' (30% in Tikamgarh and 23% in Damoh). (Table 2-48)