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**Department:** Department of Economics, Faculty of Social Science, Jamia Millia Islamia **Title of the Thesis:** Socio Economic Condition and Issues Related to Women Reproductive

and Other Health Problems: A Study on Women Health Perspective.

**Keywords:** Women Reproductive Health; Out of Pocket Expenditure; Catastrophic Health Expenditure; Impoverishing Health Expenditure; Health Care Services, Universal Health Coverage, COVID-19 Pandemic.

## **FINDING**

Health indeed plays a fundamental role in human life and well-being. As per the globally acclaimed definition of health, a good health does not merely indicate the absence of disease but the state of physical and mental wellness. The predominant prevalence of various communicable and non-communicable diseases has always been a major concern worldwide and reproductive health is one of them. Along with other non-communicable diseases, reproductive health was a rising concern across the globe over the decades. Several international apex institutions along with the World Health Organization (WHO) had made numerous moves and policy initiatives to curb the persistent reproductive health issues among people irrespective of gender. As per previous literatures and various statistics, the incidence of chronic reproductive morbidity is prevalent among women in India. On this backdrop the present study attempted to conduct research on the socio-economic condition of the women suffering from chronic reproductive morbidities and intends to enquire their health seeking behavior regarding the same. The study also aims to enquire the cost implication of the health care expenditure incurred for the treatment. The study is focused to the women of reproductive age group (15-49 years) who possesses at least any one of the four specific reproductive organ or system related issues viz. 'abnormally heavy bleeding and painful menstruation', 'irregular menstrual cycle', 'abnormal vaginal discharge or white discharge' and 'reproductive tract infection'. The present study has focused on five major objectives which includes 'pattern of resort or common pathway of seeking treatment', 'health care expenditure consequences with reference to out of pocket expenditure', 'perspective towards health care providers adhered for treatment seeking', 'coverage of health scheme' and 'impact of COVID- 19 on health seeking behavior'.

On the basis of primary survey of 400 individual women from Uttar Pradesh and West Bengal, 200 from each state, the overall results and findings reveals that, In Uttar Pradesh initially respondents have chosen public health care as their first place of treatment but mostly ended up with seeking treatment from private health care institutions, contrarily in West Bengal majority of respondent opted public hospital as their first place of treatment and most of them ended up seeking treatment from the same place. Overall young married

women are less likely to seek treatment for their reproductive ailment at the first instance. Illiterate women and those who are purely housewives are less likely to seek treatment for their ailments during the first flare up compared to the working women. Female belongs to the household with number of female members more than male members are less likely to seek treatment for their reproductive morbidities. Although the incidence of catastrophic health expenditure is quite high both in Uttar Pradesh and West Bengal but the intensity differs which claims that the intensity of CHE is higher in Uttar Pradesh compared to West Bengal. Along with CHE the incidence and intensity of impoverishing health expenditure (IHE) is also high in both the states where even a small amount of out-of-pocket expenditure pushes the household below the poverty line. In Uttar Pradesh respondents have positive opinion towards private health care institutions and negative opinion towards public health care institution, contrarily in West Bengal, on an average respondents have positive opinion towards public health care institution and possess negative opinion towards private health care institution. Findings also reveals that,

in Uttar Pradesh respondent's health seeking behaviour is quite indifferent among scheme holders or non-scheme holders whereas in West Bengal significant difference has been observed among scheme holders or non-scheme holders towards their responsiveness for the same which indicates the likeliness of treatment seeking is less among non-scheme holders. Non-availability of the benefit of any scheme demotivates their overall health seeking behavior. In Uttar Pradesh respondents reported that COVID-19 has moderately impacted their health seeking behaviour whereas in West Bengal respondents reported that the same has impacted their health seeking behaviour drastically.

As far as concern to the remedial measure vis-a-vis policy suggestions, focus must be given in strengthening primary health care units. In this regard, a global approach of universal health coverage (UHC) is a need of an hour. Universal health coverage asserts 'health for all' which broadly defines that all people should have access to the full range of quality health care services whenever and wherever they need without any financial hardship. An intersectoral convergence must be drawn among the sectors which are directly or indirectly linked to the health sector viz. food and nutrition, drinking water, hygiene and sanitation, education, rural water supply etc. Lack of awareness is undoubtedly a profound reason behind slacked treatment seeking behvaiour, but it is important to note that spreading awareness only among the diseased women would not be sufficient enough to influence their opinion on treatment seeking, since it has been observed that the decision of women regarding treatment seeking is somehow influenced by their spouse, family members and social surroundings. Universal health coverage could practically be attended through technological interventions which advocates the accessible, affordable and comprehensive health care services.