



A Survey on Use of Contraceptives and Sexual Health Awareness

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ABSTRACT:

Sexual health means having a responsible, satisfying and safe sex life that is free from disease, injury, violence, disability, unnecessary pain or risk of death. It is achieved through use of contraceptive methods and the treatment of involuntary infertility. Reproductive health and contraceptive use is a crucial part of general health and a central feature of human development. This study aimed to assess the awareness on sexual health and use of contraceptives. This was survey based study method which was conducted among individuals aged 18-40 years old. Data was collected via a self-administered multiple response questionnaire. Data analysis was performed on 107 individuals. It is estimated that about 17.1% of people had a good knowledge about use of contraceptives and sexual health awareness also they felt comfortable discussing or to get knowledge about reproductive health issue from friends or internet rather than parents or medical professional. There were 73.3% of people who are unaware about sexual transmitted infections. Most of them did not care about using condoms while having sex. Knowledge about birth control and sexual health issues among people was dismal. Hence there is a clear need of spreading Knowledge and awareness about sexual health, STD's and contraceptive methods.

KEYWORDS: Contraceptive methods, Birth control, Sexual health, Sexually transmitted diseases.

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I. INTRODUCTION:

India is the second most populated country in the world with nearly a fifth of the world's population. According to the 2019 revision of the World Population Prospects the population stood at 1,352,642,280. Every sixth person on the globe today is an Indian, and by the turn of the century, every fifth living person will be an Indian. India adds 46,500 persons to its population every day. The religiously orthodox and conservative people are against the use of family planning measures. There are women who disfavor family planning on the plea that they cannot go against the wishes of God. There are some women who argue that the purpose of a woman's life is to bear children. Other women adopt a passive attitude: "If I am destined to have many children, I will have them. If not, I will not have them. Why should I bother about it".^[1]

In 2017, Ministry of Health and Family Welfare launched Mission Parikar Vikas, a central family planning initiative. The key strategic focus of this initiative is on improving access to contraceptives through delivering assured services, ensuring commodity security and accelerating access to high quality family planning services. Its overall goal is to reduce India's overall fertility rate to 2.1 by the year 2025. Along with that two contraceptive pills, MPA (Medroxyprogesterone acetate) under Antara program and Chaya (earlier marketed as Saheli) are made freely available to all government hospitals.^[2]

The Indian demographic dividend is youth-dominated, and therefore, issues pertaining to youngsters, including sex and sexuality need to be given high priority. Yet, on the contrary, these issues are not even taken

into account marginally. The stigma attached to sex and sexuality ensure that such issues never enter public discourse. Discussions around sexual health are frowned upon.^[3]

The World Health Organization (WHO) defines “adolescent” as an individual between 10 to 19 years of age. According to UNICEF, there are 243 million adolescents comprising 20% of the total population of India. Nearly 27 % of adolescent mothers have reported an unmet need for contraception and 35% of HIV infections occur among the young people in the age group of 15-34 years. Majority of adolescents still do not have access to information and education on sexuality, reproduction, and sexual and reproductive health and rights, nor do they have access to preventive and curative service. Therefore, a Survey on Use of Contraceptives and Sexual health awareness was conducted with the objective of assessing sexual health awareness among the population in terms of age, sex, opinions on various sexual aspects in life of an individual along with use of various methods of contraception and about extent of sexual health awareness amongst the individual populations.^[4]

ORAL CONTRACEPTIVES:

Oral contraceptives (birth control pills) are hormone-containing medications that are taken orally to prevent pregnancy. They prevent pregnancy by inhibiting ovulation and also by preventing sperm from penetrating through the cervix. By far the most commonly prescribed type of oral contraceptive contains synthetic versions of the natural female hormones estrogen and progesterone. This type of birth control pill is often called a combined oral contraceptive. Another type of oral contraceptive, sometimes called the mini pill, contains only progestin, which is a man-made version of progesterone. Correctly using male and female condoms can help to prevent the of STDs and pregnancy. Dental dams ,a barrier method for oral sex, can also help to prevent STDs. Most condoms and dental dams are made from latex or polyurethane which may be preferable for individuals with latex allergy.

Many elements need to be considered by women, men or couples at any given point in their lifetimes when choosing the most appropriate contraceptive method. In choosing a method of contraception, dual protection from the simultaneous risk for HIV and other STDs also should be considered. Although hormonal contraceptives and IUDs are highly effective at preventing pregnancy.^[5]

Taking birth control pills may reduce risk of Heavy bleeding, irregular periods, painful periods and menstrual cramps, Ectopic pregnancy- a pregnancy that occurs outside the uterus, particularly in the fallopian tubes , Iron deficiency anemia ,Acne ,Unwanted hair growth ,Pelvic pain due to endometriosis ,Pelvic inflammatory diseases.^[6]

a)Reversible Methods of Birth Control:

Levonorgestrel intrauterine system (LNG IUD)- The LNG IUD is a small T-shaped device like the copper T IUD. It is placed inside the uterus by a doctor. It releases small amount of progestin each day to keep you away from getting pregnant. The LNG IUD stays in uterus for up to 3 to 6 years, depending on the device. Typical use failure rate: 0.1-0.4%

Copper T intrauterine device (IUD)-This IUD is a small device that is shaped in the form of a “T”. Doctor places it inside the uterus to prevent pregnancy. It can stay in uterus for up to 10 years. Typical use failure rate: 0.8%.

b) Hormonal methods:

Implant-The implant is a single, thin rod that is inserted under the skin of a women’s upper arm. The rod contains a progestin that is released into the body over 3 years. Typical use failure rate 0.1%.

Injection or “shot”-Women get shots of the hormone progestin in the buttock or arm every three months from their doctor. Typical failure rate: 4%.

Combined oral contraceptives(COC’s)-Also called “the pill,” combined oral contraceptives contain the hormones estrogen and progestin. It is prescribed by doctor. A pill is taken at the same time each day. Typical failure rate: 7%.

Progestin only pill- Unlike the combined pill, the progestin-only pill (sometimes called the mini pill) only has one hormone, progestin, instead of both estrogen and progestin. It is prescribed by a doctor. It is taken at the same time each day. It may be good option for women who can’t take estrogen. Typical use failure rate: 7%.

Patch- This skin patch is worn on the lower abdomen, buttocks or upper body. This method is prescribed by a doctor. It releases hormones progestin and estrogen into the bloodstream. Put on a new patch once a week for three weeks. During the fourth week, no need to wear a patch, so woman can have a menstrual period. Typical use failure rate: 7%.

Hormonal vaginal contraceptive ring- The ring releases the hormones progestin and estrogen. Place a ring inside a vagina. Wear a ring for three weeks, take it out for week when woman got the period, then put in a new ring. Typical use failure rate: 7%.

c)Barrier method:

Diaphragm or cervical cap- Each of these barrier methods are replaced inside the vagina to convert the cervix to block the sperm. The diaphragm is shaped like a shallow cap. Before sexual intercourse, insert them with spermicide to block or kill the sperm. Visit to the doctor for a proper fitting because diaphragm and cervical cap come in different sizes. Typical use failure rate: 17%.

Sponge- The contraceptives sponge contains spermicide and is placed in the vagina where it fits over the cervix. The sponge works for up to 24 hours, and must be left in the vagina for at least 6 hours after the last act of intercourse, at which time it is removed and discarded. Typical use failure rate: 14% for women who never had a baby and 27% for women who have had a baby.^[20]

Female condoms- Worn by the woman, the female condoms help to keep the sperm from getting into her body. It is packed with a lubricant and is available at the drug stores. It can be inserted up to 8 hours before sexual intercourse. Typical use failure rate: 21% and also may help to prevent STDs^[7]

d)Emergency contraceptives:

Emergency contraception is not a regular method for birth control. Emergency contraception can be used after no birth control was used during sex, or if the birth control method failed, such as if a condom broke.

Emergency contraceptive pills- Women can take emergency contraceptive pills up to 5 days after unprotected sex, but the sooner the pills taken, the better they will work. Some emergency contraceptive pills are available over the counter.

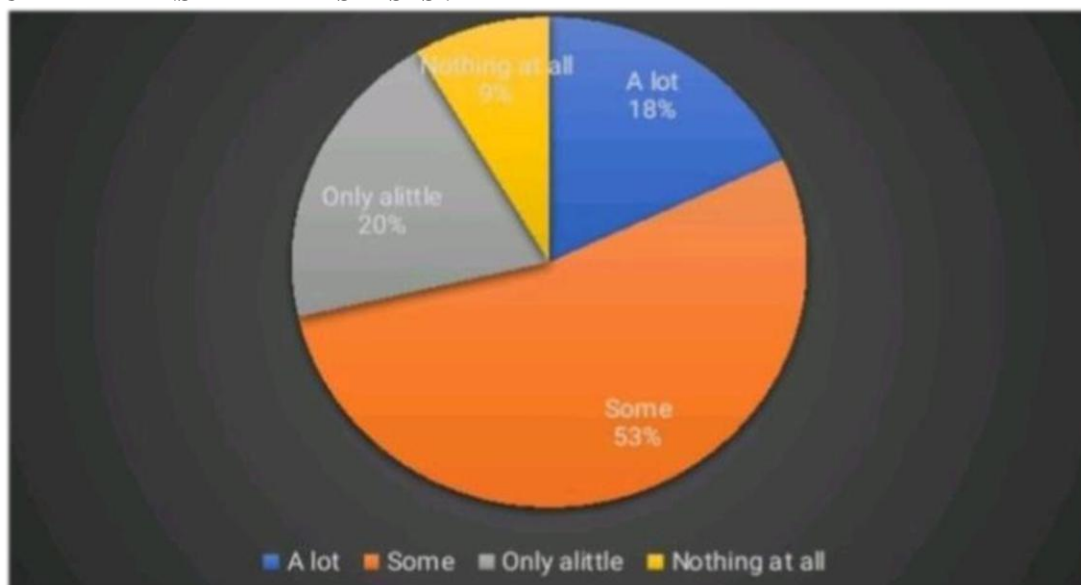


e) Permanent methods of birth control:

Female sterilization- Tubal ligation or “Tying tubes”- A woman can have her fallopian tubes tied (or closed) so that sperm and eggs cannot meet for the fertilization. The procedure can be done in a hospital or in an outpatient surgical centre. This method is effective immediately. Typical use failure rate: 0.5%

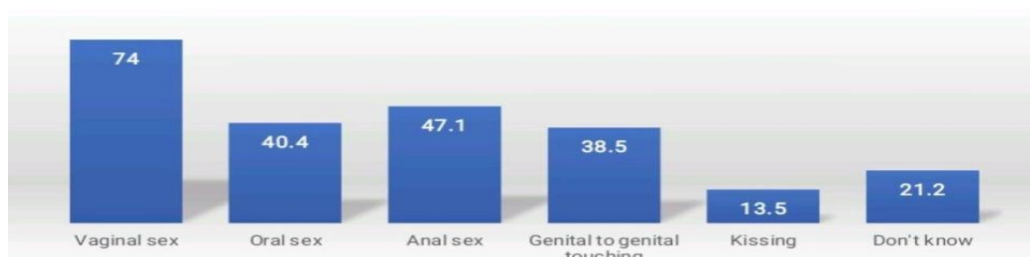
Male sterilization-Vasectomy- this operation is done to keep a man’s sperm from going to his penis, so his ejaculate never has any sperm in it that can fertilize an egg. The procedure is typically done at an outpatient surgical centre. The man can go home the same day. After the operation, a man visits his doctor for tests to count his sperm and to make sure the sperm count dropped to zero; this takes about 12 weeks. Another form of birth control should be used until the man’s sperm count has dropped to zero. Typical use failure rate: 0.15% ^[8]

SEXUALLY TRANSMITTED DISEASES :



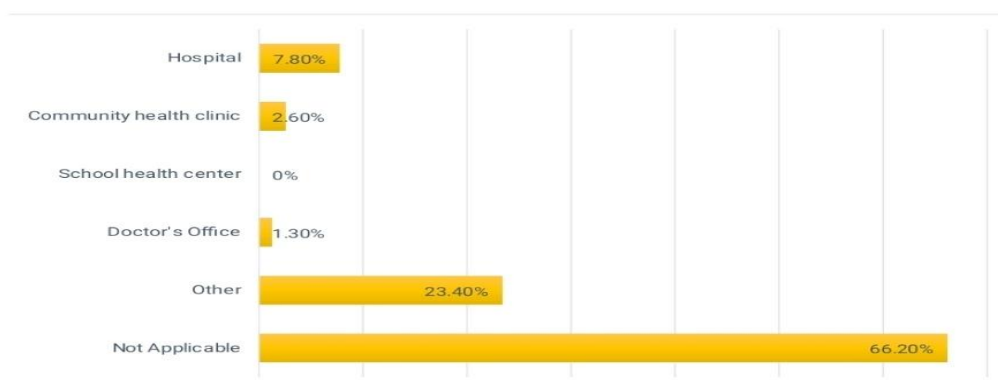
From the responses it can be seen that 18% of the people are aware of STDs.,20% are having a little knowledge of STDs and only 53% of people have a fair idea about how to prevent STDs.

When we asked people about their opinions regarding STDs, 54.8% agreed with the statement which was saying as “unless you have sex with lot of people, STD is nothing you worried about”. That’s not really acceptable, instead people should become aware of the fact that they can acquire STDs from any individual they are having physical contact with. So Sexual contact in this case is a very easy way through which one can acquire STDs since its an intimate kind of contact amongst individuals.



Different kind of individuals have different kind of perception towards transmission of STDs because from the percentage of mixed responses it can be observed that people believe that they can get STDs from having vaginal sex (74 %), anal sex (47.1%) ,oral sex (40.4%) , Genital touching (48.5%) . Also it can be seen that condoms being the first and foremost method of contraception for 85.2% individuals and for avoiding STDs

By the obtained responses it is seen that 98.9% of individuals had never been tested for any kind of STDs whereas only 1.1% of people have taken the initiatives towards STDs testing which shows that such a large number of population is not conscious at all towards their sexual health and this urges the need of spreading Sexual health awareness amongst individuals of our society.



Even it is also observed that very less number of people that is only 2.1% of people have seen doctor for the treatment of STDs while rest of the people haven't approached any physician to treat their STDs.

Only few people have seen looking for treatment of STDs in community health clinic (2.6%) and 1% in Doctor's clinic . 6% of people seek treatment for STDs in Hospitals. 66.2% of people are not bothered about taking treatment from any health facility centre.

Now speaking about the measures taken by the individuals to avoid STIs 21.8% of people have found to never take any measures whereas 12.8% of individuals take the measure of taking bath before and after having sex in order to avoid STDs till an extent they can. Many percentage of doctors and nurses have seen talking to their patients regarding pregnancy, STDs, Sexual health issues and methods of contraception. It was astonishing to view the response that 98.8% of people never suffered from any kind of STDs / are not suffering from STDs at present. Very few that is 1.2% of people are suffering from life threatening diseases such as HIV/AIDS, which seems to be a very critical scenario and has to be worked upon by spreading awareness on use of contraceptives and sexual health. And also there is a great need of spreading knowledge on severity of HIV/AIDS infection.

DISEASES	CHLAMYDIA	GENITAL HERPES	CRABS (PUBIC LICE)	HUMAN PAPILLOMA INFECTION	SYPHILIS	GONORRHEA	HIV
CAUSATIVE AGENT	Chlamydia trachomatis	Herpes simplex virus (HSV)	Crabs or pubic lice, which are small and difficult to see, attached to pubic hair	Human papilloma virus (HPV)	Treponema pallidum	Neisseria gonorrhoeae	Human immunodeficiency virus (HIV)
TRANSMISSION	Anal, vaginal and oral sex	HSV 1 spreads through saliva, herpes related sore around mouth of another person. HSV 2 spreads through vaginal, oral and anal sex.	Close physical contact, including sexual contact, shared towels or bed linen	Vaginal and anal sex, Oral sex, Genital to genital contact, From a pregnant woman to a baby.(this is rare)	The bacterium can spread at any point during the infection and can also pass to the baby during pregnancy	Sexual contact	Sexual contact, Sharing needles, Contact with broken skin, Giving birth, breastfeeding
AFFECTS	Rectum, vagina	Genital area, anal area, oral area.	Pubic area	Skin and mucous membranes, such as the throat,	Genital areas Skin Nervous system	In lower abdomen, Pelvis, Testicles, vagina	Nervous system, Eyes, Lungs, Skin,

				cervix, anus and mouth			GIT
SYMPTOMS	Rectal pain, Rectal Bleeding, Rectal discharge, Burning pain during urination	Blisters around the mouth, anus or genital area also fever, body aches, swollen lymph nodes	Itching, irritation, small blue spots of blood on skin	Genital warts	Lesions in the mucous membrane such as mouth, vagina or anus. Swollen lymph nodes, Hair loss, Weight loss, Muscle aches, Fatigue, fever	Pain during sex Discharge, Swelling of the genitals, Bleeding between periods.	Pain in the abdomen, Dry cough, Red blotches, Weight loss, Skin rash, Swollen lymph nodes
COMPLICATIONS	It can result in infertility and other complications if a person does not seek treatment for it.	Having herpes can also increase the chance of transmission of HSV	Scratching can lead to an infection such as impetigo (a bacterial skin infection) or furunculosis (boils on the skin)	Increase the risk of cervical cancer and throat cancer.	In a tertiary stage, life threatening complications can affect the brain, nervous system, eyes, heart etc.	Pelvic inflammatory disease (in female) Epididymis inflammation (in male).	Pneumocystis pneumonia Candidiasis Tuberculosis Cryptococcal meningitis
TREATMENT	Antibiotic therapy (a single dose of azithromycin or a week of Doxycycline are commonly used)	There is currently no cure but medication can help relieve any symptoms. daily antiviral medication can help to prevent the spread of herpes.	To remove the pubic lice in the genital area, a person can apply a 1% permethrin solution or similar products	There is no cure for the virus and warts may go away by their own treatment focuses on removing the warts.	Syphilis is treated with penicillin. Sexual partners should also be treated with penicillin	Antibiotic (Azithromycin, Ceftriaxone)	No cure exist for AID's but strict adherence to antiviral regimens can shows the progress also prevents secondary infections.

[9]

Masturbation :

Masturbation is a normal and healthy sexual activity with few side effects. Masturbation is the self-stimulation of the genitals to achieve sexual arousal and pleasure, usually to the point of orgasm (sexual climax). It is commonly done by touching, stroking, or massaging the penis or clitoris until an orgasm is achieved. Some women also use stimulation of the vagina to masturbate or use "sex toys," such as a vibrator. Masturbation is when an individual stimulates their genitals for sexual pleasure, which may or may not lead to orgasm. Masturbation is common among men and women of all ages and plays a role in healthy sexual development^[19]. People masturbate for many reasons which include pleasure, enjoyment, fun, and tension release. Some individuals masturbate alone, while others masturbate with a partner. Many bizarre claims surround masturbation, such as going blind, and most of these claims are untrue and also there are many myths about masturbation. Masturbation will not cause Blindness, Hairy palms, Impotence later in life, Erectile dysfunction, Penis shrinkage, Penis curvature, Low sperm count, Infertility, Mental illness, Physical weakness. Some couples worry that their relationship must be unsatisfying if either one of them masturbates; this, too, is a myth.^[10]

Masturbation has also been identified as a strategy to improve sexual health by promoting intimacy, exploring self-pleasure, desires, and needs, reducing unwanted pregnancies, and preventing sexually transmitted diseases (STDs) and HIV transmission. In addition to feeling good, masturbation is a good way of relieving the sexual tension that can build up over time, especially for people without partners or whose partners are not willing or available for sex. Masturbation also is a safe sexual alternative for people who wish to avoid

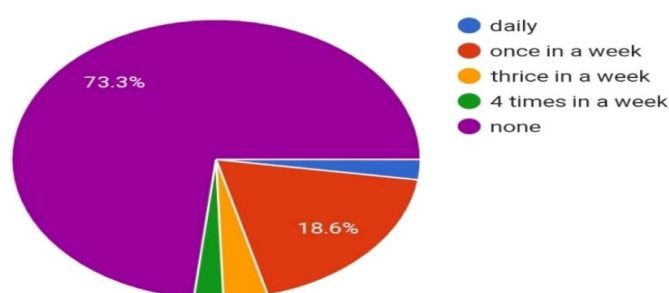
pregnancy and the dangers of sexually transmitted diseases^[17]. It also is necessary when a man must give a semen sample for infertility testing or for sperm donation. When sexual dysfunction is present in an adult, masturbation may be prescribed by a sex therapist to allow a person to experience an orgasm (often in women) or to delay its arrival (often in men).^[10]

While it once was regarded as a perversion and a sign of a mental problem, masturbation now is regarded as a normal, healthy sexual activity that is pleasant, fulfilling, acceptable, and safe. Masturbation is only considered a problem when it inhibits sexual activity with a partner, is done in public, or causes significant distress to the person. It may cause distress if it is done compulsively or interferes with daily life and activities. Some cultures and religions oppose masturbation or even label it as sinful. This can lead to guilt or shame about the behaviour. In infants and young children, unusual postures and movements occur during masturbation and may be misdiagnosed as seizures, movement disorders, abdominal pain, colic, or other neurologic or medical problems. Extensive unwarranted investigations may be performed in general, the medical community considers masturbation to be a natural and harmless expression of sexuality for both men and women^[18]. It does not cause any physical injury or harm to the body, and can be performed in moderation throughout a person's lifetime as a part of normal sexual behaviour.^[16] In rare cases, some individuals may masturbate more than they desire, which may cause them to miss work, school, or important social events, interrupt a person's daily functioning, affect their responsibilities and relationships, serve as an escape from relationship issues or substitute for real-life experiences. Someone who thinks they might be adversely impacted by their masturbation practice should speak with a healthcare professional. A doctor or counsellor may suggest talk therapy to determine ways that they could manage one's sexual behaviour. Consulting a sex therapist may also help with coping strategies for excessive masturbation.^[11]

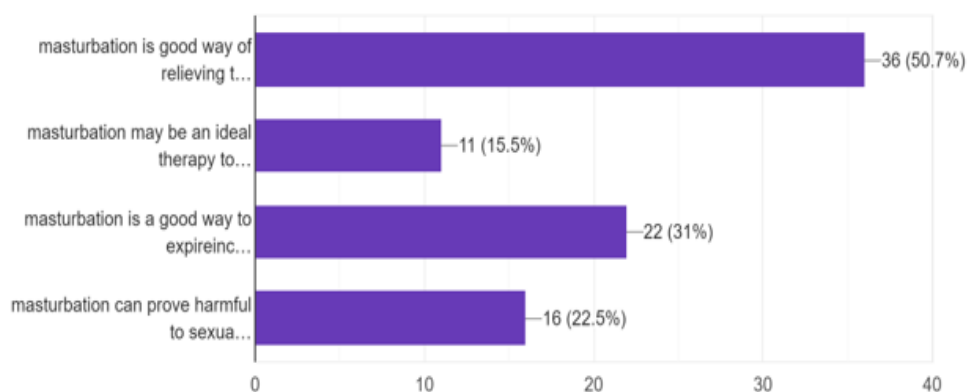
Council of sex education and parenthood (International) CSEPI

The roots of the Council of Sex Education and Parenthood (International), (CSEPI) hereafter mentioned as the Council is embedded in the Family Planning Association of India (FPAI). The then President Dr. (Mrs.) Avabai Wadia a woman of great foresight and vision, agreed to a suggestion by Dr. Mahinder Watsa who was then a consultant for medical affairs FPAI to strengthen the sexual health services in the FPAI programmes and particularly to introduce programmes in human sexuality, sexual counselling for adolescents, youth, newly married and others in the community. It's mission Council conducts National Conferences every year to train and update health care professionals in the domain of Human Sexuality. Thereby the Council strives to promote Sexual Health of the general populace^[12]

It was found that 73.3 % of the population do not engage in the activity of masturbation, whereas only



2.3 % masturbate on daily basis. But also it can be seen that for 18.6% of the population, it is necessary to masturbate once in a week. And for others, it is on an irregular basis. This shows that for a major percentage of people, masturbation is not an important requirement.

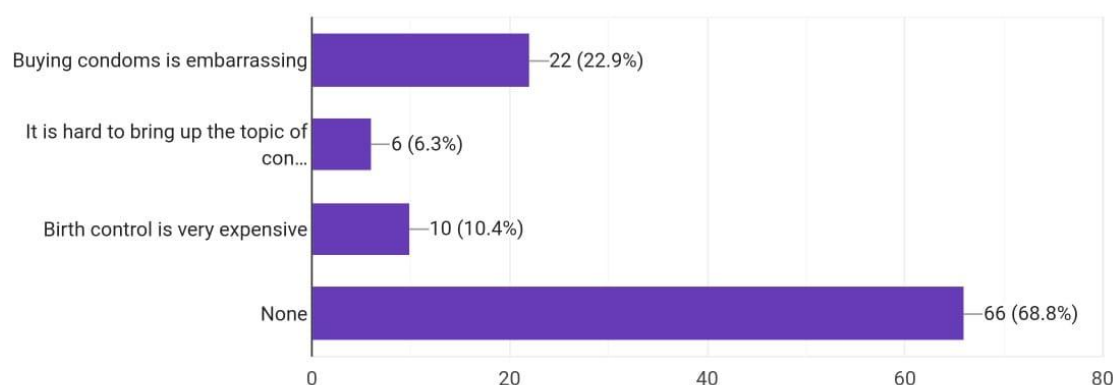


Very few people believe that masturbation is serious health threat which can't be said otherwise until and unless it becomes compulsive or obsessive to an individual ,instead masturbation is the ultimate form of safer sex. A large mass of population have a strong belief that masturbation is a good way of relieving sexual tension that can build up overtime, an ideal therapy to gain sexual orgasm in men/women who have sexual dysfunctioning, good way to experience sexual pleasure and can be done throughout life and last but not the least that very few people say that masturbation can prove harmful to sexual health and masturbation ideally has said to provide no harm to human body since it covers up a good number of benefits regarding sexual health of an individual as stated above.

Sexual Health Awareness:

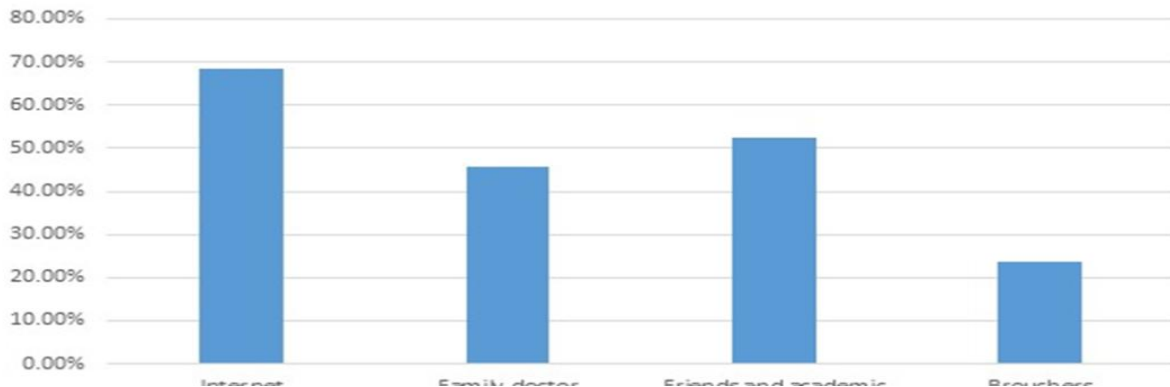
Over the years, India has developed a lot, in terms of education, society, mind set etc. but sex is still considered a taboo. People prefer not talking about it or sharing any information. If you speak the word sex out loud you are being looked upon by your elders. Public discussion about sexual practices is still considered wrong, therefore it acts as a barrier for delivery of adequate and affective sexual education to Indian adolescents. In an interview with the NDTV, Vidya Balan once said it feels funny, in spite of being the most populated country in the world, we still don't talk about sex openly. The idea of sex is looked down by people because Indian culture wants us to be sexual only in the institution of marriage, for purposes of procreation. But the whole feeling, the joy of intimacy, pleasure and fun is missing".Kamasutra was originated in India, a famous Hindu text, which is widely considered to be a classic work on human sexual behaviour. Whether it be sexual education in the form of Kamasutra and scriptures and pornographic depictions through sculptures and paintings, sex was never taboo in ancient India and was always a part of Indian culture. But according to the modern Indian society, sex is a taboo. The first evidence of attitudes towards sex comes from the ancient texts of Hinduism, Buddhism and Jainism, the first of which are perhaps the oldest surviving literature in the world. These most ancient texts, the Vedas, reveal moral perspectives on sexuality, marriage and fertility prayers.

But, today talking about sex is considered bad. If you belong to a good family or have had a good upbringing talking about sexual activities is something you will not do. This mind set or attitude is what leads to the lack of sexual awareness peoples. ^[13]

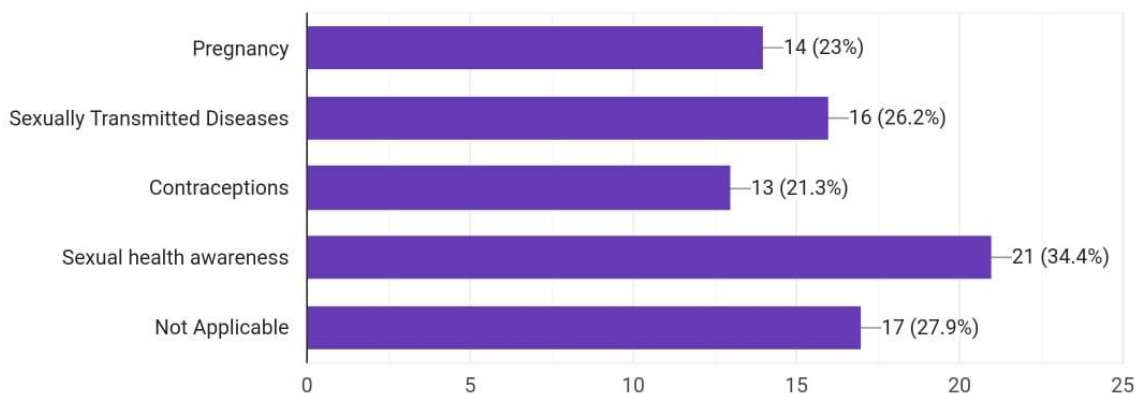


Our study showed that today also 22.9% of people feel that buying condoms is embarrassing even though it is very common thing. also some people do agree with things that “bringing up about topic of condoms is hard amongst individuals”. A survey by Fusion Condoms found 56% of people surveyed, were embarrassed to buy them. When it came to men, 54% got red faced while 57% of woman did. Sexual health charities agree embarrassment is still a big issue for many people. We are still so shy about sex and condoms, many people find it easier to have sex rather than to talk about it," says Genevieve Edwards, executive director of health improvement at the Terrence Higgins Trust. It indicates it is a population-wide issue, something that doesn't really change whatever sex or age. Buying condoms is a public declaration that you want sex and many people still aren't comfortable with that.^[14]

DIFFERENT SOURCES OF INFORMATION PEOPLE RELY ON:

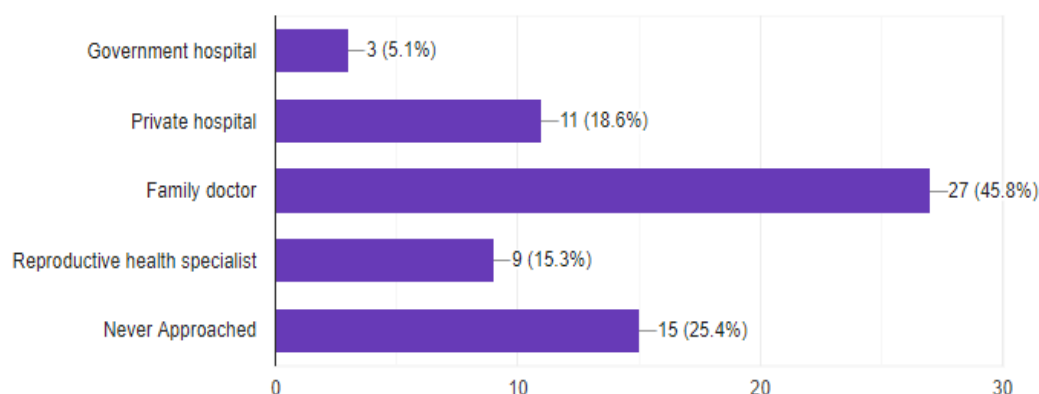


It can be seen that peoples are more relied on internet (68.6%),family doctor(45.8%) or on friends and academic (52.3%) to get information about contraceptives use and sexual health awareness, they feel it is quite good and more trusted source to gather the information about it. Also Posters of contraceptives have proved to be very useful and wakening medium to convey information to people regarding the proper utilization of medical devices employed in contraception. According to our survey, 23.8% of people received some useful information regarding sexual health through brochures on contraception which is very good way to provide information , since some people face embarrassment to speak on sexual health topic with doctors or any other health professional.

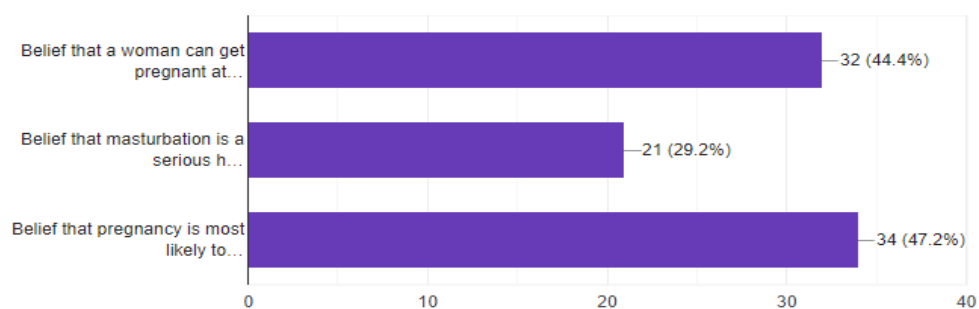


Sexual health is an essential element of overall health and well-being, still medical providers and patients often do not discuss this topic. Many patients have questions related to sexual health and wants doctors insight, but are hesitant about initiating the conversation. Our survey showed only 34.4% of people had conversation with doctors or nurse related to sexual health awareness and 22% of people have approached doctor/nurse to talk about contraceptives and pregnancy and only 12.7% of people told that their doctor took initiative to talk about STDs. And 25% of people had never approached any health professional in order to discuss on this topic. It indicates that still there is need for establishing a more open and trusting relationship between patients and doctors to make people more comfortable who approach them to get information regarding their sexual health , by solving their issues at larger extent and by giving them positive assurance. In one survey they stated” Of course, some patients may not wish to discuss these matters, but there is evident that the

majority of patients would prefer to have an opportunity to discuss their sexual concerns with a health professional.^[14]



Due to lack of proper facility available and inconvenience of patients in government hospital only 5.1% of people have been seen to be turning up here to gain proper info about sexual health. Since reproductive health specialist and private hospital provide better facilities with high charge therefore, nearly 15.3% and 18.6% of people respectively turn up here. Almost 25.4% of people never came across such services. So, it shows that there is a need of improvement of facilities and appointing good health professional staff in government hospitals as well, so that more and more number of people would gather in government hospitals to gain appropriate information regarding sexual health or any other problems related to this. 45.8% of people approached family doctor to receive information regarding sexual health. Also it can be seen that only 3% of people visited sexual health centre for pregnancy test and for advice on contraception. Nearly 41% of people visited sexual health centre to get information about reproductive health, general sex education, for sexual health examination or counselling.



Our study showed that 47.2% of people believe that pregnancy is most likely to occur at mid cycle which is very true. So it is quite good to see that large number of people are aware of it. A female is most likely to get conceived in the mid menstrual cycle phase. This phase is called the fertile window. A female is most likely to become pregnant in the middle of her menstrual cycle, which is when the ovary releases an egg in a process called ovulation. The egg then travels to the uterus, where a sperm cell can fertilize it. According to the Office on Women's Health, the average menstrual cycle is 28 days. The menstrual cycle is the time between the first day of one period and the first day of the next period. Ovulation usually occurs 7–19 days after a person's period ends. The egg can only survive for 12–24 hours after ovulation. For this reason, it must meet a sperm cell in this time for pregnancy to occur. A female is most likely to get pregnant if she has sexual intercourse in the 3 days before and up to the day of ovulation. Since a female with 28-day cycles typically does not ovulate until around a week after she stops bleeding, she cannot usually get pregnant during her period. According to our survey people also believe that a girl can get pregnant at her first intercourse which can not be surely said as it depends on many factors like whether the time of having sex matches with time of ovulation or was the female having proper reproductive health.^[15]

II. DISCUSSION:

Our study showed that about 77.6% of people out of all those individuals who participated in our survey, belonged to age group range from 20-40 who are sexually active. In that 53% of people have a strong belief that masturbation is a good way to relieving sexual tension that can build up overtime. They believe it is an ideal therapy to gain sexual orgasm in men-women who have sexual dysfunction and also it is good way to experience sexual pleasure but few people say that masturbation can prove harmful to sexual health. In every group of 100 , 1-2 person/s are suffering from HIV, AIDs, STDs due to unprotected sexual habits. About 12.2% of people use emergency birth control pill and still 37.8% of people do not use any emergency birth control pill whereas 66.2% of people are not bothered about using or knowing about contraceptives and any birth control method. Considering people who use contraceptives, 23.8% of people received some useful information regarding sexual health which is a quiet good indication. Since some people face embarrassment speaking on sexual health topics only 12.7% of people have approached doctors/nurse to talk about STDs and 11.1% of people to speak about issues related to pregnancy. Most of people trust that condoms effectively protect against STDs . Studies says that condoms cannot protect against all kinds of STDs like herpes , genital warts and syphilis which can be spread through skin to skin contact as well. 16.7% of people still believe that condoms can be used more than once and it cannot give rise to any severe sexual health problems. Still 52.9% of individuals did not care about using condoms while having sex. Nearly 73.2% and 65.9% of people have a view that 'Awareness on knowledge of IUD, implant, gelly/foams sterilization technique' and 'Awareness on oral contraceptives and supply source' respectively is necessary. Rest of the people agree on topic of "Awareness on pills/injection and their supply source" is required. But awareness on contraception techniques which are new and advanced in the reproductive health care system, is much more necessary, since most of the people are unknown to such techniques.

Our study showed that about 59.1% of people are not comfortable to talk about sexual health, whereas 91.6% of people never visited sexual health awareness centre and it also showed that now youngsters are getting better knowledge about sexual life from various sources which includes academic (52.3%), internet (68.5%), friend circle (45%) , awareness program (45%) .

In conclusion, almost a high level of sexual activity was not covered by the correct use of contraception methods that resulted from inadequate information among men-women. This resulted in a high rate of unintended pregnancy and reliance on abortion to prevent unwanted births. Strategies to increase awareness about contraceptive usage are essential. Dedicated educational programs on contraception through seminars, television talk shows, radio programs, school-based magazines and printed media will improve the knowledge and ability of women to prevent unintended pregnancy. There is also a need to encourage the establishment of women-friendly centres where people can go for Counselling , as well as to obtain accurate information about contraceptive methods. Health care providers play an effective role in teaching the correct use of contraceptive methods, therefore, it is expected that the government must make an attempt to create courses about family planning which seems to be a considerable help for planning and promoting mother's health plans. There is a definite increase in contraceptive uptake in women provided with educational leaflets and counselling session with a shift toward use of more reliable contraceptive methods. There were some limitations to this survey based study and also there was potential for information bias towards giving whatever the respondents thought would be an acceptable response to the researcher, rather than revealing the whole truth. Our results suggest that there is a need for periodic survey on more such topics.

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