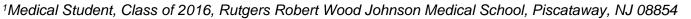


BARRIERS TO WOMEN'S SEXUAL HEALTH CARE IN HIMACHAL PRADESH, INDIA

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Purpose: To assess sexual health, and its barriers, among women of reproductive age in rural villages of Himachal Pradesh, India.

Background:

- •In rural areas of developing countries, gynecological and sexual care are often overlooked
- •This is problematic because the consequences of STIs are potentially devastating:
 - · Tubal pregnancy, miscarriage, increased risk of newborn death, infertility, cervical cancers, chronic physical pain, emotional distress, and social rejection of women
- ·Sexual Health Statistics in Himachal Pradesh:
 - Sexually active population: 3.5/6.8 million³
 - · STIs rank second among women of reproductive age (15-49 years old) for healthy life lost³
 - · Other relevant statistics are displayed in Figures 1 and 2.

Himalayan Health

Methods:

- Himalayan Health Exchange (HHE) team of medical students and physicians examined approximately 1.000 patients in clinics throughout Himachal Pradesh
- Trip Duration: June 20th- July 11th, 2013
- · Patient Population: Rural villagers
- · Clinic Locations: Chattru, Rangrik, Sumdo, Dunkhar, Mane, Tabo, Kungri, Lalung
- Data Collection: Qualitative data was collected consisting of
- Personal log entries detailing observations and evaluation of clinic patients
- · Interviews with HHE medical students and physicians about their patient interactions

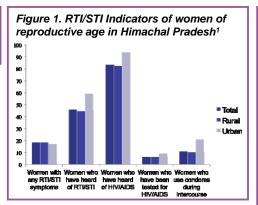
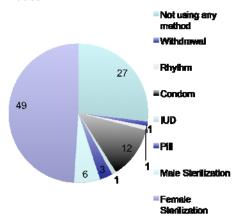


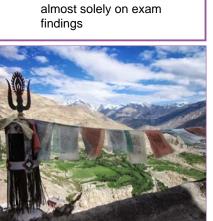


Figure 2. Method of contraception among women of reproductive age in Himachal Pradesh²



Results:

- •Interviews with HHE colleagues revealed:
- · Gynecologic health issues were among the major complaints of women of reproductive age who visited the clinic
- · Many students expressed shock over the high prevalence of STIs among women
- · Very few patients reported using condoms during sexual intercourse
- •Of twenty-five patients personally examined, six were women of reproductive age
 - · Three of these women suffered from STI symptoms and were treated with the appropriate antibiotics
 - · Each of the patients reported having symptoms for over one
 - · Two women reported not seeking medical attention sooner because "It's too far"
 - One patient was very reluctant to talk about her sexual habits and symptoms
 - · Subsequently, her diagnosis had to be made based almost solely on exam findings









Discussion and Conclusions:

- Current research, along with observation in medical clinics in rural villages, reveals several barriers to women's sexual health in Himachal Pradesh
- · Main barriers include:
 - · Stigma regarding sexual health that prevents women from seeking treatment
 - "Culture of Silence" surrounding STIs
 - · Lack of proper sexual health education
 - · Lack of condom use
 - Access to care is very poor
 - Closest clinic that HHE physicians could refer patients to was generally between eleven and seventeen hours away by bus
- · Many steps must be taken to improve women's sexual health in Himachal Pradesh
- · Most promising strategy currently in place to lower rates of STIs in Himachal Pradesh: National AIDS Control Program³

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