

## **Reproductive and Sexual Health Issues Faced by Adolescents in India**

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### **Introduction**

India is home to one of the largest adolescent populations in the world, with nearly 243 million individuals aged between 10 and 19 years, accounting for about 20% of the total population. Adolescence is a critical stage of human development, where individuals undergo physical, emotional, and psychological changes. During this phase, issues related to reproductive and sexual health (RSH) become crucial. Unfortunately, the reproductive and sexual health needs of adolescents in India often remain unaddressed due to various socio-cultural, educational, and policy-related challenges. This article explores the reproductive and sexual health issues faced by adolescents in India, focusing on key concerns such as lack of awareness, access to services, gender-based discrimination, early marriage, and societal stigma.

### **1. Lack of Awareness and Education**

One of the major reproductive and sexual health issues faced by adolescents in India is the lack of comprehensive knowledge and education regarding sexual health. In many parts of the country, sex education is either absent or insufficient, leading to a widespread lack of awareness about basic reproductive processes, contraception, and sexually transmitted infections (STIs).

#### **a. Inadequate Sex Education in Schools**

Despite the introduction of the Adolescence Education Programme (AEP) by the Government of India in 2005, the implementation of comprehensive sexuality education (CSE) in schools remains inadequate. Many schools either skip this topic altogether or offer a watered-down version of sexual health education due to societal pressure and cultural taboos. Parents and teachers often feel uncomfortable discussing sexual matters, and topics such as contraception, menstruation, and safe sexual practices are often considered inappropriate for adolescents.

The lack of CSE results in misinformation and misconceptions about sexual health among adolescents. They often rely on peers, the internet, or other unreliable sources, leading to confusion and risky sexual behaviors. This lack of knowledge puts adolescents at a higher risk of unwanted pregnancies, STIs, and unsafe abortions.

### **b. Myths and Misconceptions**

In the absence of accurate information, myths and misconceptions surrounding reproductive health are rampant. Many adolescents believe in misconceptions like contraception causing infertility or menstruation being a "dirty" process. These beliefs not only affect their physical health but also their emotional well-being. Adolescent girls, in particular, are often subjected to societal restrictions during menstruation, which perpetuates gender discrimination and hinders their participation in education and social activities.

## **2. Limited Access to Healthcare and Services**

Access to reproductive and sexual health services is another critical issue for adolescents in India. The healthcare system is often ill-equipped to cater to the specific needs of adolescents, and the availability of youth-friendly services is limited.

### **a. Lack of Adolescent-Friendly Health Services**

Adolescent-friendly health services (AFHS) are designed to meet the unique needs of young people by providing non-judgmental, confidential, and accessible care. Unfortunately, such services are scarce in India. Many healthcare providers lack training in dealing with adolescent issues, and as a result, young people feel uncomfortable or ashamed when seeking reproductive healthcare. The lack of privacy and judgmental attitudes of healthcare workers further deter adolescents from accessing essential services such as contraception, STI testing, and counseling.

### **b. Contraceptive Access and Use**

Access to contraception is crucial for preventing unintended pregnancies and sexually transmitted infections. However, in India, adolescents face several barriers in accessing contraception, including social stigma, lack of information, and logistical challenges. Many

adolescents do not know where to obtain contraception or are too embarrassed to visit a health center to ask for it. Cultural norms often discourage unmarried individuals from seeking contraception, as premarital sexual activity is highly stigmatized in Indian society.

The National Family Health Survey (NFHS-5) revealed that a significant proportion of adolescent girls (aged 15-19) are sexually active, yet contraceptive use remains low. Many young women, especially those from rural areas, lack the autonomy to make decisions about their sexual health, leading to unintended pregnancies and unsafe abortions.

### **3. Early Marriage and Teenage Pregnancies**

Early marriage is a widespread issue in India, particularly in rural and economically disadvantaged regions. According to the NFHS-5, around 23% of women aged 20-24 were married before the legal age of 18. Early marriage often leads to early pregnancy, which poses significant health risks to both the mother and the child.

#### **a. Health Risks of Teenage Pregnancies**

Teenage pregnancies are associated with numerous health risks, including maternal mortality, preterm birth, low birth weight, and neonatal mortality. Adolescents are more likely to experience complications during pregnancy and childbirth due to their underdeveloped bodies and lack of access to proper healthcare. Additionally, young mothers are often unprepared for the physical and emotional demands of parenthood, leading to long-term adverse effects on their mental health.

#### **b. Education Disruption and Economic Impact**

Early marriage and teenage pregnancies also disrupt adolescents' education and limit their economic opportunities. Many young women drop out of school once they are married or become pregnant, which hinders their personal and professional development. This perpetuates the cycle of poverty and gender inequality, as uneducated women have fewer opportunities to participate in the workforce or make informed decisions about their reproductive health.

### **4. Gender-Based Discrimination and Social Norms**

Gender-based discrimination and restrictive social norms play a significant role in shaping the reproductive and sexual health of adolescents in India. Patriarchal attitudes and cultural practices often place the burden of maintaining family honor on girls, which limits their autonomy and decision-making power over their bodies and sexual health.

#### **a. Son Preference and Female Foeticide**

In many parts of India, son preference persists, leading to the practice of female foeticide and gender-based discrimination. This cultural bias affects the health and well-being of adolescent girls, as they are often treated as a burden on the family. Girls may face restrictions on their mobility, education, and access to healthcare, which limits their ability to make informed decisions about their sexual health.

#### **b. Sexual Violence and Harassment**

Sexual violence and harassment are serious issues affecting adolescents, particularly girls. A significant proportion of adolescents in India experience some form of sexual harassment or abuse, both in public spaces and within their families. The fear of violence and societal judgment prevents many young women from seeking help or reporting incidents of abuse. This can have long-term effects on their physical and mental health, including trauma, depression, and low self-esteem.

### **5. Menstrual Health Management**

Menstrual health management is a critical component of adolescent reproductive health, yet it remains a neglected issue in India. Many adolescent girls face challenges in managing their menstruation due to lack of access to sanitary products, inadequate hygiene facilities, and societal stigma surrounding menstruation.

#### **a. Lack of Access to Sanitary Products**

In rural areas and low-income communities, access to affordable and hygienic menstrual products is limited. Many girls resort to using unsafe materials such as cloth, ashes, or leaves to manage their periods, which can lead to infections and other health issues. The cost of

commercial sanitary products is often prohibitive for families living in poverty, further exacerbating the problem.

### **b. School Absenteeism**

Menstrual health issues also contribute to school absenteeism among adolescent girls. Many girls miss school during their periods due to lack of proper sanitation facilities, fear of embarrassment, or cultural restrictions. This not only affects their academic performance but also perpetuates gender inequality by limiting their opportunities for education and personal development.

## **6. Mental Health and Emotional Well-being**

Adolescents' reproductive and sexual health is closely linked to their mental health and emotional well-being. The pressure to conform to societal expectations, fear of judgment, and lack of support can lead to mental health issues such as anxiety, depression, and low self-esteem.

### **a. Impact of Stigma and Taboos**

The stigma surrounding sexual health in Indian society creates a culture of silence and shame. Adolescents, particularly girls, often feel isolated and unable to discuss their concerns with their parents, teachers, or peers. This lack of open communication can have a profound impact on their mental health, leading to feelings of guilt, confusion, and fear.

### **b. Gender Dysphoria and LGBTQ+ Issues**

Adolescents who identify as LGBTQ+ face additional challenges related to their reproductive and sexual health. The lack of acceptance and understanding of diverse sexual orientations and gender identities in Indian society can lead to discrimination, bullying, and mental health issues. Many LGBTQ+ adolescents struggle with gender dysphoria and face barriers in accessing healthcare that is sensitive to their unique needs.

## **7. Policy Interventions and the Way Forward**

Addressing the reproductive and sexual health needs of adolescents in India requires a comprehensive and multi-faceted approach that involves education, healthcare, and policy reform.

#### **a. Comprehensive Sexuality Education**

Implementing comprehensive sexuality education (CSE) in schools is essential to equip adolescents with the knowledge and skills they need to make informed decisions about their sexual health. CSE should be inclusive, age-appropriate, and culturally sensitive, addressing topics such as contraception, consent, menstruation, and gender equality. Teachers and parents should also be trained to provide accurate information and create a supportive environment for open discussions.

#### **b. Access to Adolescent-Friendly Healthcare Services**

Expanding the availability of adolescent-friendly healthcare services is crucial for improving the reproductive and sexual health of young people in India. These services should be accessible, confidential, and non-judgmental, providing adolescents with the support they need to access contraception, STI testing, and counseling. Healthcare providers should be trained to address the specific needs of adolescents and create a safe space for them to seek care.

#### **c. Addressing Gender-Based Discrimination and Social Norms**

Efforts to improve adolescent reproductive health must also address the root causes of gender-based discrimination and harmful social norms. Public awareness campaigns and community-based interventions can help challenge patriarchal attitudes and promote gender equality. Empowering girls to make decisions about their bodies and their futures is essential for improving their reproductive and sexual health outcomes.

#### **d. Improving Menstrual Health Management**

Menstrual health management should be prioritized as a key component of adolescent reproductive health. This includes improving access to affordable and hygienic menstrual products, ensuring that schools have proper sanitation facilities, and addressing the cultural stigma surrounding menstruation. Initiatives such as free distribution of sanitary products in

schools and awareness campaigns can help ensure that girls can manage their menstruation with dignity.

## Conclusion

Reproductive and sexual health is a critical aspect of adolescent well-being, yet it remains a neglected issue in India. Adolescents face numerous challenges related to lack of education, access to healthcare, early marriage, and societal stigma, all of which impact their physical, mental, and emotional health. Addressing these issues requires a comprehensive approach that involves policy reform, education, and community engagement. By empowering young people with the knowledge, skills, and support they need to make informed decisions about their sexual health, India can ensure a healthier and more equitable future for its adolescent population.

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