

WOMEN'S CELL PCOS/PCOD WORKSHOP IN COLLABORATION WITH PRAKRITI VEDA



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Backdrop

It was observed by the teachers skiving from classes due to health issues is becoming a regular feature among students.

A general probing of classes revealed that most of the students are absent for reasons like headaches, painful periods, cysts, and weakness.

A need was felt to make the students aware of the issues regarding their health. Many talks pertaining to women's health were conducted, just to make the students aware of these issues and how to cope with them.

It was not of much use. So it was decided to take things at a wider level, with some of the following objectives in mind. The widest level is more girls under the banner of women's cell to help girls.

Objectives

- 1. To know about the health patterns (physical and mental) of young girls.
- 2. To enquire about the general socio-economic familial parameters of the students who are currently studying in M.K.P PG college (The year 2020- 2025).
- 3. To establish practicality in our approaches to handling students, a need was felt to conduct a survey of the parameters mentioned in point 2.
- 4. A need was felt for comprehensive approaches, where the general patterns of the student population could be mapped out.

As:

- (a) teachers felt a need to develop an understanding of the generational changes where the teacher and the student community fail to strike a chord at a relatable level.
- (b) Generational changes include a profusion of changes on the level of perspectives, lifestyle, approach to college education and higher studies, and also to college as an institution.
- (C) It was actually necessary to educate the students and, not just provide them with academic knowledge, but also to help them evolve into responsible citizens.

Last, but not least, empowering women is the motto of Women Cell. So it appeared necessary to let girls learn to take charge of themselves beginning from this mental and physical

health. Once they are fully confident about themselves, they can achieve anything and it will help them become an Empowered Women.

Visualization through facilitation program: A 21-day challenge

After a discussion with gynecologists allopathic and ayurvedic practitioners and integrative health coach experts, it was felt that the health of women needs to be in better grasp and understand the perspective of changing lifestyle and its impact on their Physiological and Psychological conditions. In all these discussions and lectures it was observed that women have moved ahead on various so-called development indicators but they are somewhere struggling to strike a balance between their physical, mental and spiritual well being it seems to be a constant fight between fad and biology.

A program was designed to develop

- (a) awareness of controlling health through self-corrective techniques which include
 - (i)Lifestyle/ diet
 - (ii)Exercise
 - (iii)Management of stress
- (b) It was planned especially for that group of girls who reported health issues through the first google form.

- (c) After the google form a questionnaire was created to collect detailed information on different dimensions of the mental and physical health of girls.
- (d)An offline interactive session was planned with the doctor for a motivational talk. This seemed to be necessary as girls fail to recognize the symptoms of their ill health and also think of it as taboo in discussing it with their friends, family, or relatives.
- (e)Aside from that, it was planned that on that day the questionnaires would be distributed.
- (f) it was decided after the informative talk the research team will collect questionnaires and analyze the data.
- (g)In the subsequent talk to the girls was addressed on the basis of responses received from the questionnaires.
- (h)The seven-day challenge was introduced to the students by the doctors.
- (i) It was planned that the first two days would only be devoted to nutrition and health.
- (ii)On the third and the fourth-day girls were given tips on self-hygiene and its importance.
- (iii)The fifth and sixth days was focussing on the medium of art as a stress buster.

- (j)During The 7-day challenge various means such as exercise, exhibition, games, quizzes, drawing, coloring, and modes of self-expression through singing, acting, and role-playing were used.
- (k)The key factor in the whole program was lifestyle changes, sleep cycle, hygiene, exercise, and personal well-being management.

The slips between the cup and the lip.

- 1. As envisaged a target group could not be created.
- 2. It was observed that at the time of questionnaire distribution, the group that volunteered lacked consistency, information, and awareness.
- 3. In Spite of the efforts of the doctors and teachers, the very purpose of empowering ourselves could not be put across to the students.
- 4. It was observed that discussion about health Issues has been the last priority among the youth, especially girls.
- 5. The reason for the lack of interaction between the researchers and the target group could be attributed to the officious approaches adopted by doctors and teachers.

The Programme: Seven-day long journey: shape and content.

1. The workshop on PCOS/PCOD was conducted to collect data about girls who are facing problems related to PCOS/PCOD and spread basic health awareness.

2. A program was conducted by MKP PG College in coordination with Prapriliveda.

3. It was especially conducted for girls who were facing problems like Depression, Stress, Low Blood Pressure, Eyst, and painful periods.

4. There were twenty-one (21) volunteers who were asked to give information without any fear or hesitation with a condition that their information would be kept secret.

5. The Questionnaire include Question on

* Personal Information

* Information about family

* Psychological and Physiological indicators of health.

Description: The Sample

Males

On having a look at the first table and bar chart we see that the maximum number of observations falls under the age interval 41-45. Out of a total of 36 males, 7 males fall under the age interval 41-45.

The least number of members falls in the age interval 81-85, with only 1 member.

In the bar chart, the age interval has been taken along the X-axis, while the frequencies on the number of males falling into each class have been taken along the Y-axis

					GENI	DER
Male						
Age In	terval	frequ	ency	8		
0 - 5					1	
6 - 10						
11-15					3	
16 -20					5	
21-25					3	
26-30					3	
31-35						
36-40						
41-45					7	
46-50					8	
51-55					3	
56-60					2	
61-65						
66-70						
71-75						
76-80						
81-85					1	
Age Interval	0-5 11-15 21-25 31-35 41-45 51-55 61-65 71-75 81-85					frequency
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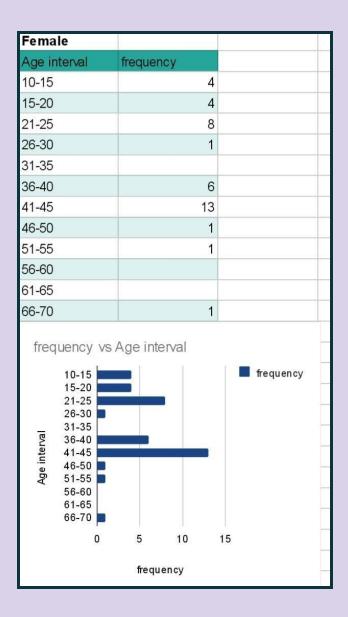
Females

On having a look at the second table and bar chart, we see that the maximum number of females falls under the age interval 40-45, with a number of 13 females out of a total of 29 females. The least members fall in the age intervals of 25-30, 45-50,

50-55 and 65-70 with only 1 female in each.

Like in the first bar chart of males, here too, the

A.I. has been taken on the X-axis while the Frequencies have been taken on the Y-axis.

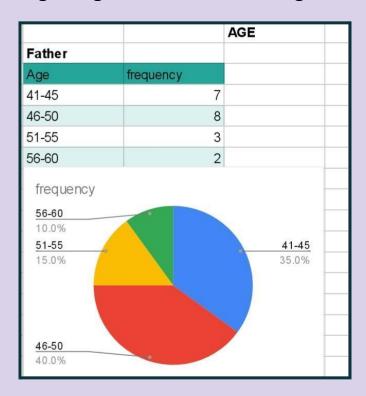


Father

Looking at the third table and bar chart we find that the maximum number of fathers is falling in the age interval 46-50 which is 8

members. And the least number of fathers are falling in the age interval 56-60 with only 2 members.

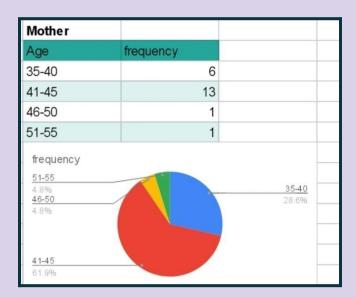
Since in the given frequency, the first class interval is 45-45, therefore the scale on the X-axis starts at 41. For this, a kind (break) or a zig-zag curve is drawn near the origin to tell the graph is drawn to scale beginning at 45, and not the origin itself.



Mother

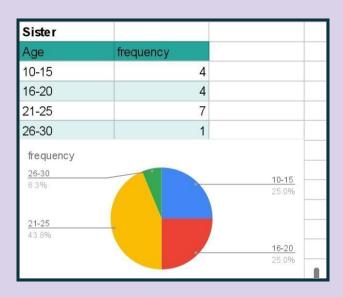
In the fourth table and bar chart, the maximum number of mothers fall under the age interval 41-45 with 13 members, out of a total of 21

mothers. While the least/minimum number of mothers are falling in the age interval 46-50, and 51-55, with only one member in each. Here too, the scale begins at 35 and not the origin itself.



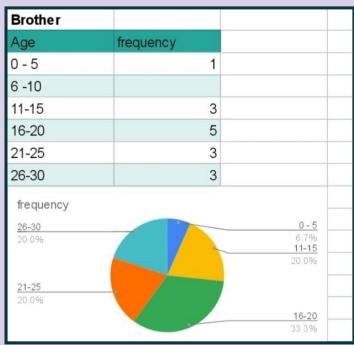
Sister

In the fifth table and bar chart, the maximum number of sisters fall under the age interval 21-25 with 7 members, out of a total of 16 members. While the least/maximum number of sisters are falling in the age interval 10-15, and 16-20, with only 4 members in each.



Brother

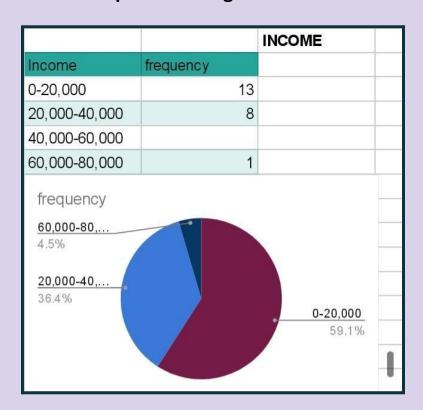
In the sixth table and bar chart, the maximum number of brothers fall under the age interval 16-20 with 5 members, out of a total of 15 members. While the least number of brothers are falling in the age interval 0-5 with only 1 member



Income

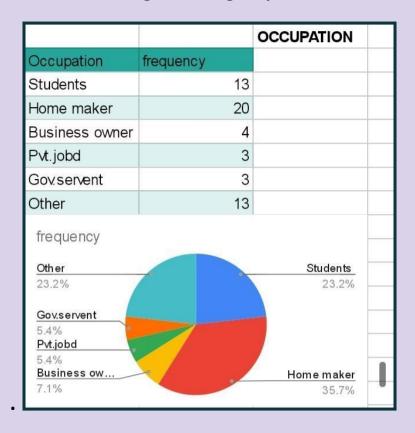
In the seventh table and bar chart, the class interval taken is 20,000. Maximum people fall under the Income Interval 0-20,000 with 13 members out of a total of 22, while the minimum number of people fall in the Income Interval 60,000-80,000, with only 1 member.

Income intervals have been plotted on the X-axis, while their frequencies on the number of members falling into that income group have been plotted along the Y-axis.



Occupation

In the eighth table and bar chart, occupations have been categorized as Student, Homemaker, Own Business, Pvt. Job, GOVT.Servant and Others, with the maximum members being Homemakers while the least number of members are in private jobs or govt. Servants, with 3 members falling in each group



- (a)This workshop pcos/pcod was conducted to collect the data of girls who are facing any problems related to pcos/pcod.
- (b)For that a program was conducted by UG/PG college in coordination with Veda.
- (c)It was specially held for the girls who are facing any problems like depression, stress, B.P or any problem related to pcos/pcos were asked to fill the forms especially made for the girls to mention their problem without any hesitation or difficulty and there were 21.
- (d)There were different topics in the form like personal information, familial information, health issues, psychological & physiological issues, etc.
- (e)In personal information volunteers were asked to fill in their details like age, weight, height, etc.
- (f)In the familial information column girls' volunteers mentioned their family members, their income, occupation, their education, their age, etc.
- (g)In spatial information volunteers were asked about the surroundings like types of roads, types of houses, their place of residence, and amenities.
- (h)In the eating and lifestyle habits volunteers mentioned their time of sleeping or waking up, type of breakfast, lunch, and dinner, and their timings. They also mentioned if they have food cravings & if it is severe or moderate & if they have any food disorder they are facing.

In the time of waking up according to the graphical representation about 6 girls out of 21 girls wake up at around 4-5 am, 7 girls out of 21 girls wake up around 5-6 am,4 girls wake up around 7-9 am and among these volunteers, 19 girls have no eating disorder while 7 participants claimed that they have an eating disorder.

- (h)According to the data collected through volunteers, it was seen that many girls do experience cramps and mood swings, and also swelling during periods. In some cases, it's too severe that they use pain relievers for their period pains and cramps.
- (i)Only 16 volunteers mentioned their family history of PCOS/PCOD among them 3 have family history while the other 13 refuse that they have no family history of PCOS/PCOD.

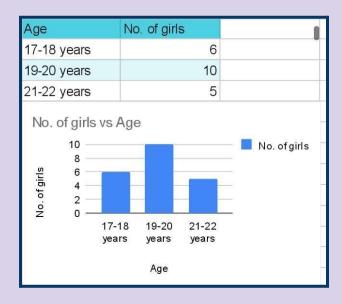
In health issues data shows that.

- 1. Energy Level: 9 girls experience low energy 10 volunteers experience medium energy and only 2 volunteers claimed to have experienced high energy out of 21 cases (9:10:2).
- 2. Acne Problems: In this 6 volunteers face low ache problems, whereas 11 volunteers were of moderate cases and the remaining 3 volunteers have severe ache problems (6:11:3).
- 3. Weight gain/loss problems: According to the data 15 volunteers have no weight gain problems whereas other 5 volunteers out of 20 do have weight gain problems, & among these volunteers, 6 participants do face problems while losing weight, whereas other 14 have no problems related to weight loss.

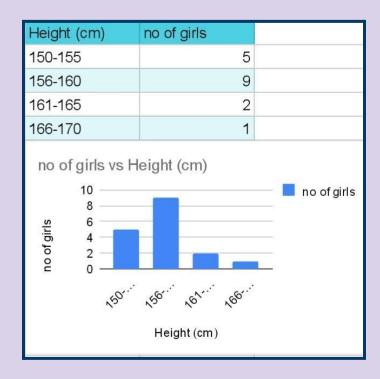
- 4. 14 out of 21 girls face hair loss problems while the other 7 don't have any problems.
- (a)In the graphical representation it was seen that 10 out of 18 girls have the problem of irregular period flow while the other 8 girls have regular period flow.
- (b)In this 9 volunteers mentioned that they have light bleeding during periods while the other 10 volunteers mentioned their bleeding during periods is heavy.

And the majority of the cases mentioned that they do have stress anxiety and insomnia, as also shown in the bar graphical representation.

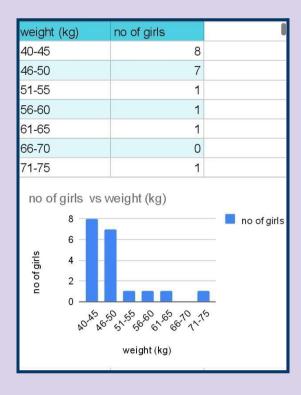
Age of the girls



Height of the girls



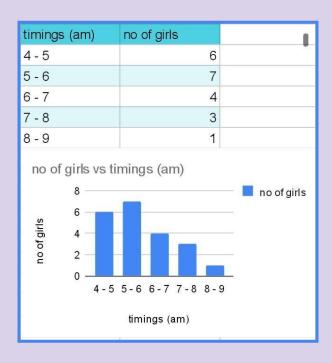
Weight of girls



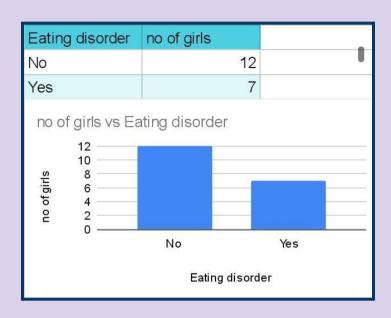
Type of road



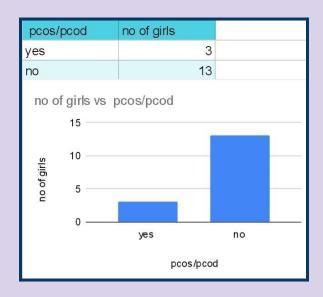
Time of waking up



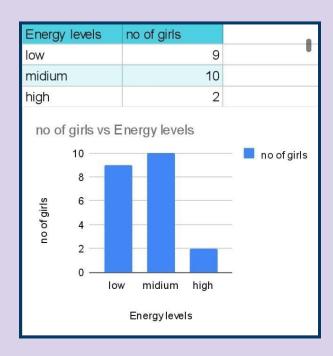
Eating disorder



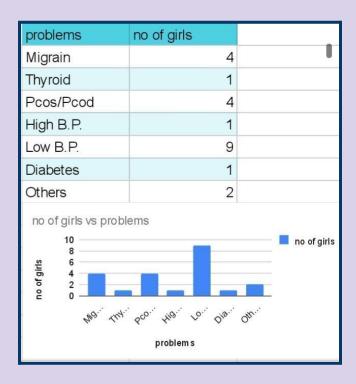
Family history of PCOS/PCOD



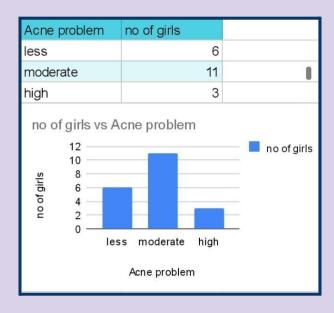
Energy levels



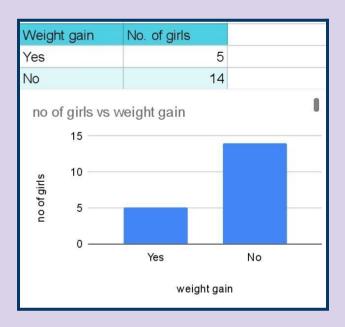
Health problems



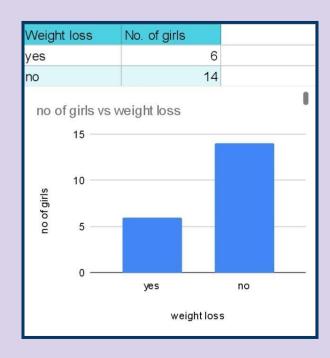
Acne problems



Weight gain problems



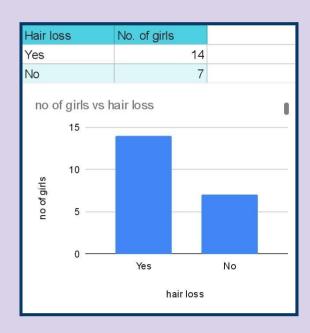
Weight loss problems



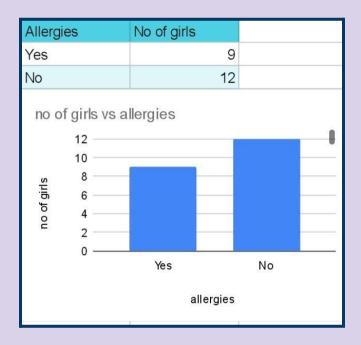
Facial hair problems



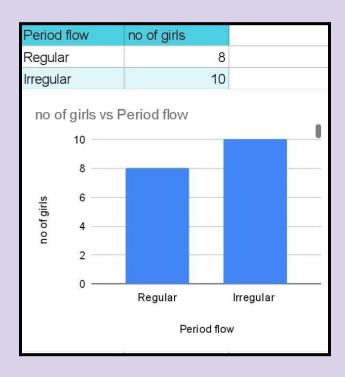
Hair loss problem



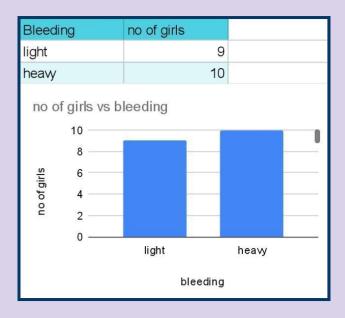
Allergies



Period flow



Bleeding during periods



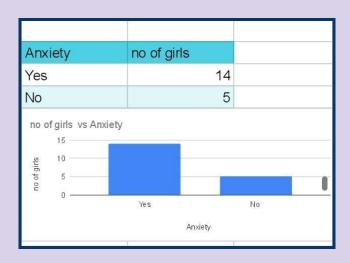
Tension



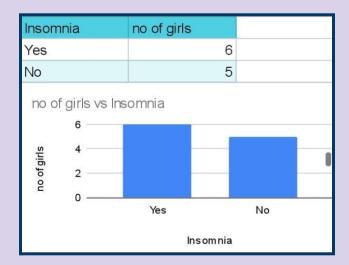
Stress



Anxiety



Insomnia



Conclusions

- (a)Most of the respondents are in the age group of 17-20 years (16) and have a general height range, of 150-160 cm.
- (b)General weight of the respondents is 40-50 kgs.
- (c)The physical conditions in which they stay mostly consist of 3 room sets on roads in urban/semi-urban locations.
- (d)Families of the respondents mostly consist of young parents and young members, except in a few cases.

Mostly the males in the families of respondents ranged from 16-50 years and females from 10- 45 years.

- (e)Fathers of respondents are in the age group of 41-50 and mothers in the age group of 35-45.
- (f)Income of the families ranges from 20,000 to 60,000/monthly.
- (g)Occupational background for mothers is usually homemaker and father it is our business to jobs.

Health Profile

- Out of 21 respondents 20 respondents reported migraines, thyroid, PCOS/PCOD, high /low BP, and diabetes.
- Generally, girls face (11) moderate acne problems.
- Weight gain is also faced by 5 girls out of 21.
- Weight loss is also a problem faced by girls.
- Out of 21 girls, 9 girls face the problem of facial hair, 14 face the problem of hair loss, and one faces the problem of allergies.
- Heavy bleeding and irregular periods is a problems faced by 10 girls out of 21.
- Stress is the major component of these respondents 17 out of 21 girls face stress in day to day lives.
- Anxiety is faced by 14 girls and insomnia by 6.

Conclusions from the sample

Out of the 21 respondents, 9 to 10 seem to be moving towards ill health, though their lifestyle and food habits seem to be all right stress seems to play a major role in ill health.