



## Determinants of Utilization of Antenatal Care Services Amongst Attendees In A Medical College Hospital Situated in Rural Area of Jaipur.

## KEYWORDS

MCH,ANC.

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**ABSTRACT** MCH(mother and child health) care is a method of delivering health care to special group in the population. Ante natal care (ANC) is an important component of MCH. It encompasses the curative, preventive and social aspect of obstetrics. The contents of MCH care vary according to demographic, social and economic patterns. Factors such as urbanization, rural migration, changing pattern of women's status have far reaching effects on child bearing and child rearing. Keeping this in mind this study was carried out at our institute (NIMS) to find out the determinants of utilization of antenatal care amongst attendees in our ANC and Family Welfare OPD. based on the observation of this study it can be established that education and socioeconomic status has a significantly positive impact on the behavior of the ANC seeking women.

**Introduction:**

In all societies the family is the central nucleus for the people for their lives, their dreams and their health. A women in her role as mother forms the backbone of the family. Yet lacs of woman continue to die every year in the world from pregnancy related causes. These causes are largely preventable and according to WHO1, 75% of maternal deaths are avoidable.

Lowering maternal mortality is easy, simple measures like awareness about proper and timely ante-natal check ups can do a lot. Many lives can be saved with the knowledge we have today. The challenge is to transform this knowledge into action. antenatal care encompasses the curative, preventive and social aspect of obstetrics. The importance of antenatal check-ups in reducing maternal and infant morbidity and mortality is tremendous.

Maternal and peri-natal outcomes directly reflects on the quality of care received by the pregnant and parturient women..In India, despite the increasing no. of Govt . health facilities and availability of incentive schemes like Janni Suraksha Yojana (JSY), many of them still prefer private health facilities, so the reasons for this have to be analyzed, which may be within:

1. Service provider
2. Clients (Beneficiary)

On the service providers part reasons may be

1. Shortage of manpower
2. Inadequate funds
3. Inadequate supplies

On beneficiary's part the reason for not properly utilizing these services may be

1. Lack of awareness
2. Access is not easy
3. Lack of cost effectiveness
4. Poor quality of services
5. Socio-demographic barriers

**Objectives:**

1. To identify socio-demographic determinants of wom-

- en seeking antenatal care
2. To find out the reasons for seeking health care in a private sector hospital

**Material and methods:**

This hospital based cross sectional study was conducted in the ante natal cum family welfare OPD of National Institute of Medical Sciences (NIMS). Jaipur. 400 women availing ante natal services were interviewed. The first eight women attending the the OPD were included as sample subjects for a period of 50 days from 26 Sep 20014 to 14<sup>th</sup> Nov 2014. A pre-tested questionnaire was used to obtain information on their socio-demographic variables. Information was also collected on their knowledge of ante- natal care and health seeking behavior concerning pregnancy and satisfaction regarding MCH services rendered by Govt. hospitals. Data , thus collected were analyzed by using EXCEL software. A value of less than 0.05 was considered statistically significant.

**Observation:**

The study results show that majority of women 341(85.25) were in the age group of 21-30 years, 32(8%) of them were of under 20yrs rest were more than 30years of age(Table1)

**TABLE 1:**

Age in yeas	No of women	percent
<20	32	8.0
21-25	186	46.50
26-30	155	38.75
>30	27	6.75
total	400	100-

It was seen that 268(67%) were literate while 132(33%) were illiterate.(Table2)

**TABLE 2**

Educational status	No of women	percent
illiterate	132	33.0
primary	182	45.5
middle	48	12.0
Hr. sec	38	9.5
UG	-	-
PG	-	-
TOTAL	400	100

Out of total respondents only 5.6% were employed while the rest 94.4% were housewives.(Table3)

TABLE 3

OCCUPATION	No of women	percent
employed	24	5.6
housewife	376	94.4
Total	400	100

Based on MC Gupta per capita scale 4 6.75% women belonged to upper middle class: 30% to the lower middle class: 63.25% to the lower class (Table 4)

TABLE 4

Social class	No of women	percent
Upper middle	27	6.75
Lower middle	120	30
lower	253	63.25
total	400	100

On question about Knowledge on antenatal care as to whether antenatal care was essential 367 responded in affirmative while 33 viewed ANC was not necessary.

The study observed that 200 women registered themselves at a healthcare facility in the first trimester: 161 (40.25%) in the second trimester while 39 (9.75%) women had registered in their third trimester. Of these who had registered in the first trimester, 88% were literate and this is significant at  $p$ -value  $< 0.01$  (Table 5)

TABLE 5

registra-tion	1 <sup>st</sup> trimester	2 <sup>nd</sup> trimester	3 <sup>rd</sup> trimester	total
registerd	200(50%)	161(40.25%)	39(9.75%)	400(100%)

Further, it was found that 262 respondent were taking iron and folic acid tablets, the consumption of iron also showed a statistically significant association with the literacy status of the women. (Table 6)

TABLE 6

IFA Tablets	No. of women
Recieved	262(81.5%)
Not Recieved	138(19.50%)
Total	499(100%)

Responding to question whether ANC was essential and about component of ANC, 367 women responded in affirmative. (Table 7)

Table 7 knowledge on components of antenatal care amongst ANC attenders

S.N.	knowledge about component of antenatal care	Number (%)
1	Examination by doctor	206 (51.5%)
2	Information, advise and precautions	76 (19.0%)
3	Taking medicine	80 (20.0%)
4	Taking injections	69 (17.25%)
5	Problem solving	48 (12.0%)
6	Care during pregnancy	39 (9.75%)
7	Undergoing laboratory test	11 (2.75%)
8	Relief from pain	7 (1.75%)
9	For good health of baby	106 (26.5%)

Replying to Reasons for visiting this hospital, 33.5% said it was a large hospital and better ANC would be provided, 22.25% had come due to peer group influence, while 14.25% had come for routine check-up.

The clients' perception about govt health facility were graded according to

- Convenience of the health facility
- Quality of services
- Behavior of staff
- Utilization of services

104 (26%) were of the perception that services offered by the govt hospitals were very poor, 142 (35.5%) felt it was poor, 95 (23.8%) found it satisfactory, only 42 (10.5%) felt it was good and a minimum of 17 (4.2%) graded it excellent. This calls for authorities to do introspection to improve the situation.

#### Discussion:

In this study we found that a majority of the women, 93.25 per cent were in the age group of 20-30 years and only 6.75% were more than 30 year old.

Of 225 women who had previous deliveries 60% of them had delivered in hospitals while 40% had home deliveries. This shows a significant association between the literacy status of women and their place of delivery ( $p < 0.05$ ). In a study on status of reproductive health among women in rural Meerut, it has been observed that 92% of the women had home deliveries<sup>2</sup>. This difference could be due to the fact the study was conducted in a rural setting whereas the present study was conducted in a tertiary care hospital.

Of the 400 respondents, only 50% were found to have registered themselves during their first trimester whereas RCH programme stresses on early registration because an early intervention can lead to safer pregnancy and childbirth. The findings of a previous study in south India shows that 56% of the women had registered in first trimester<sup>3</sup> whereas another study reveal that 74% of women had got themselves registered during their first trimester<sup>3</sup>. The study by Mathew et al<sup>3</sup> was conducted in south India with a better literacy rate explains the higher percentage of early registration in comparison to the findings of the study by Chopra et al<sup>2</sup> which was undertaken in rural Meerut where literacy level among women could be comparatively lower. In a survey conducted about awareness and utilization of MCH services, it was found that knowledge of ANC was significantly different between educated and uneducated respondents<sup>5</sup>

ANC visits play a critical role in preparing a woman and her family for proper child birth. ANC service provides a platform to establish a confidence between the pregnant women and the health care providers, who should inform the pregnant lady about proper mother and child care

#### Conclusions:

The findings of this study emphasizes on the fact that widespread awareness on antenatal care should be enhanced and the women should be well informed about all the components of antenatal care and their benefits. This study has established that literacy has significant positive impact on the behavior of the ANC seekers

Though our centre is not only a referral centre but caters to a large population better services could be provided by the GOVT. The findings of this study also suggest for proper counseling to the targeted women to prevent anaemia by improving the consumption of iron folic acid tablets and better self care for a safe delivery.

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