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SOCIO DEMOGRAPHIC PROFILE OF PREGNANT WOMEN ATTENDING ANTENATAL CLINIC AT THREE URBAN HEALTH CENTRES OF BELAGAVI – A **CROSS SECTIONAL STUDY**



Community Medicine

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ABSTRACT

Background and Objective: Pregnancy is a unique, exciting and often joyous time in a woman's life, as it highlights the woman's amazing creative and nurturing powers while providing a bridge to the future. Proper antenatal care is one of the important ways in reducing maternal and child morbidity and mortality. Pregnancy comes with some cost, however, for a pregnant woman needs also to be a responsible woman so as to best support the health of her future child. This present study was conducted to assess the socio demographic profile of pregnant women attending

Methodology: This one year cross sectional study was done in three UHCs Ram Nagar, Ashok Nagar and Rukmini Nagar which are urban field practice area of Jawaharlal Nehru Medical College, Belagavi. Data was collected from 360 pregnant women attending the antenatal clinic of three UHCs. Information on socio demographic details was obtained.

Results: Out of total 360 participants, In the present study mean age of study participants was 24.3±3.92 years, 54.7% were Muslim by religion. A large number of study participants had studied up to high school 37.8%. As many 95.3% pregnant women were housewives. Most of participants belonged to class III socio-economic status as per modified B G Prasad classification. 15.2% were having previous history of abortion

Conclusion: There is a need for universal screening to pick up risk factor such as age ≥30 years and various other factors to prevent maternal and fetal morbidity. Risk factors such as age ≥30 years can lead to gestational diabetes mellitus in pregnant woman. To improve community awareness on Antenatal care, information, education and communication activities should be increased on Antenatal care through community campaign and mass media like local television channel, radio and local newspapers. There is a need to motivate women to utilize maternal care services which are freely available in all the government health set ups. Based on these results it concluded that, plan for preventive strategies and to improve maternal outcomes.

KEYWORDS

Socio Demographic Profile, Pregnant Women, Antenatal Clinic.

INTRODUCTION

Antenatal care (ANC) is the care a woman receives throughout her pregnancy in order to ensure that both the mother and child remain healthy. 1.2 A healthy diet and life style during pregnancy is important for the development of a healthy baby and may have long term beneficial effects on the health of the child.³ Proper antenatal care is one of the important ways in reducing maternal and child morbidity and mortality. Understanding maternal knowledge and practices of the antenatal care during pregnancy and delivery are required for program implementation. Data on this very important issue are scarce in our state. Therefore present study was carried out to assess the socio demographic profile of pregnant women attending antenatal clinic.

METHODOLOGY

This one year cross sectional study was done during 1st January to 31st December 2014 in three UHCs Ashok Nagar, Ram Nagar and Rukmini Nagar, which are urban field practice area of Jawaharlal Nehru Medical College, Belagavi. Data was collected from 360 pregnant women attending the antenatal clinic of three UHCs irrespective of period of gestation. The sampling method adopted was systematic random sampling technique. After obtaining written informed consent, a pretested questionnaire was used to collect information regarding socio-demographic details.6 Numerical variables were analysed as means and standard deviation. SPSS version 16 was used for analysis of data. Ethical clearance was obtained from the Institutional Review Board of Jawaharlal Nehru Medical College, Belagavi.

TABLE 1 Distribution Of Study Subjects According To Age Group

Age group in years	No.	%
≤ 19	37	10.3
20-24	170	47.2
25-29	101	28.1
≥ 30	52	14.4
Total	360	100

TABLE 2:- Distribution Of Study Subjects According To Religion

Religion	No.	%
Hindu	163	45.3
Muslim	197	54.7
Total	360	100

TABLE 3: Distribution Of Study Subjects According To Educational Status

Educational status	No.	%
Illiterate	19	5.3
Primary school	63	17.5
High school	136	37.8
PUC	104	28.9
Graduation	38	10.5
Total	360	100

TABLE 4: Distribution Of Study Subjects According To Occupation

Occupation	No.	%
Working	17	4.7
Housewife	343	95.3
Total	360	100

TABLE 5: Distribution of study subjects according to socio economic status (Modified B. G. Prasad classification)

Socio Economic Status	No.	%
Class I	36	10
Class II	44	12.2
Class III	128	35.6
Class IV	98	27.2
Class V	54	15
Total	360	100

TABLE 6: Distribution Of Pregnant Women According To Previous History Of Abortion.

Previous history of abortion	No.	%
Yes	55	15.2
No	137	38.1
Not Applicable (Primigravida)	168	46.7
Total	360	100

In the present study total 360 participants were taken.

Table no. 1 Of the 360 pregnant women who participated in the study, 37 (10.3%) were in the age group of ≤ 19 years, 170 (47.2%) were in the age group of 20-24 years, 101 (28.1%) were in the age group of 25-29 years and 52 (14.4%) were in≥30 years age group.

Mean age group of the study participants was 24.3±3.92 years. Range was 18-37 years.

Table no. 2 Out of 360 study participants, 163 (45.3%) were Hindus, 197 (54.7%) were Muslims.

Table no. 3 In present study, 19 (5.3%) were found to be illiterate, 63 (17.5%) had primary school education, 136 (37.8%) had high school education, 104 (28.9%) had PUC school education and 38 (10.5%) were graduated.

Table no. 4 Out of 360 pregnant women, 17 (4.7%) were working and majority 343 (95.3%) were housewives.

Table no. 5 In the present study, 36 (10%) belonged to class I, 44 (12.2%) to class

II; 128 (35.6%) to class III, 98 (27.2%) to class IV and 54 (15%) belonged to class V socio economic class.

Table no. 6 In the present study, 55 (15.2%) were having previous history of abortion, 137

(38.1%) were not have previous history of abortion and 168 (46.7%) were not applicable to ask history of abortion because they were primigravida.

DISCUSSION

In present study the mean age group of the study participants was 24.3±3.92 years. Of the 360 pregnant women who participated in the study, 10.3% were in the age group of ≤ 19 years, 47.2% were in the age group of 20-24 years, 28.1% were in the age group of 25-29 years and 14.4% were in \geq 30 years age group, whereas study conducted in Kashmir⁷ showed that there were no participants < 19 years and half of the participants were in the age group of 26-30 years and only 1.3% study participants belonged to age group >35 years. Another study done in Guntur, South India⁸ showed 53% study participants belonged to age group 21-25 years and only 4% belonged to >30 years of age. In present study 45.3% were Hindus and 54.7% were Muslims, whereas study conducted in Assam⁹ showed majority 97.7% of study participants belonged to Hindu religion and only 2.3% to Muslim religion.

In present study, 5.3% were found to be illiterate, 17.5% had primary school education, 37.8% had high school education, 28.9% had PUC school education and 10.5% were graduated. A study conducted in Haryana¹⁰ showed that, 4.9% were illiterate, 11.9% had primary schooling and 21.9% were graduated which is higher than our study. In the present study majority 95.3% of study participants were housewives and only 4.7% were working. Similarly study done at rural block of Assam⁹ showed that higher proportion of participants were housewives than working.

In the present study only 10% belonged to class I socio economic status, 12.2% to class II, 35.6% to class III, 27.2% to class IV and 15% belonged to class V. A study conducted in North India showed 45.4% of the study population belonged to socioeconomic class III 45.4% and only 1% belonged to class I.

In present study, 15.3% were having history of abortion, 38.1% were not having history of abortion and 46.6% were not applicable to ask history of abortion because they were primigravida, whereas study conducted in Ghaziabad, Uttar Pradesh¹¹ showed 22% had previous history of abortion.

CONCLUSION

There is a need for universal screening to pick up risk factor such as age ≥30 years and various other factors by assessing properly socio demographic profile of pregnant woman to prevent maternal and fetal morbidity. Larger studies are needed to analyze the socio economic status to find out the risk factors associated with pregnancy. Risk factors such as age ≥30 years can lead to gestational diabetes mellitus in pregnant woman. To improve community awareness on ANC, information, education and communication activities should be increased on ANC through community campaign and mass media like local television channel, radio and local newspapers. There is a need to motivate women to utilize maternal care services which are freely available in all the government health set ups. Based on these results it

concluded that, plan for preventive strategies and to improve maternal outcomes

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