

ORIGINAL RESEARCH PAPER

A CROSS-SECTIONAL STUDY ON UTILIZATION OF ANC SERVICES & ITS ASSOCIATED SOCIO-DEMOGRAPHIC DETERMINANTS AMONG WOMEN RESIDING IN THE RURAL FIELD PRACTICE AREA OF A TERTIARY CARE ESTABLISHMENT AT INDORE, MADHYA PRADESH.

Medicine

KEY WORDS:

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IBSTRACT

Antenatal care (ANC) services are considered to be the most crucial element in the primary health care delivery system of any healthy society. We are aware that the maternal health situation in rural India has been a cause of concern for us, in spite of the rapidly progressing socio-economic environment overall. India has realized impressive gains in Mother & Child survival over the last two decades. MMR as per 2012-2013 in India is 167 as per MMR bulletin, though there are variations between states in the Country1. In 2013, an estimated 2,89,000 women worldwide died from complications arising from pregnancy & childbirth2. In view of the above facts, a study was conducted in the rural field practice area of IMCHRC, Indore to assess the utilization of ANC services & its associated socio-demographic determinants.

INTRODUCTION

Antenatal care (ANC) services are considered to be the most crucial element in the primary health care delivery system of any healthy society. We are aware that the maternal health situation in rural India has been a cause of concern for us, in spite of the rapidly progressing socio-economic environment overall. India has realized impressive gains in Mother & Child survival over the last two decades. MMR as per 2012-2013 in India is 167 as per MMR bulletin, though there are variations between states in the Country1. In 2013, an estimated 2,89,000 women worldwide died from complications arising from pregnancy & childbirth2. In view of the above facts, a study was conducted in the rural field practice area of IMCHRC, Indore to assess the utilization of ANC services & its associated socio-demographic determinants.

OBJECTIVES

- To find out the Utilization of ANC services in the rural areas of Indore.
- 2. To study the socio-demographic factors associated with the utilization of available services.
- To educate pregnant mothers about the importance of ANC services and to promote safe motherhood practices for a healthy outcome of pregnancy.

Material & Methods

Study design: Cross-sectional study

Study period: 1st December 2016 to 15th January 2017 **Study area:** Rural field practice area of IMCHRC, Indore

Study population: Pregnant women & recently delivered women

Inclusion criteria:

- 1. Pregnant women in 3rd Trimester
- Women who have delivered within past 3 months of the study.

Exclusion Criteria:

- 1. Pregnant women in 1st & 2nd Trimester.
- Mothers who have delivered beyond past 3 months from the time of study

Sample Size: 112 pregnant women in 3rd trimester & ones who have delivered within past 3 months.

Data Collection: Oral questionnaire method, using a pretested "Prototype Safe Motherhood Questionnaire". Help of ASHA and AWW's were taken to identify these respective women and available documents like anganwadi registers were cross-checked for authentication.

Sample design: Simple random sampling was used for selecting villages.

Statistical analysis: SPSS 20.0 was used to calculate data on MS Excel-2010 Sheet.

RESULTS

Fig.1: Age of Mother during 1st pregnancy

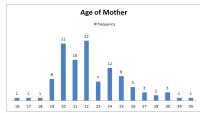


Fig. 2: Distribution of women on the basis of Religion

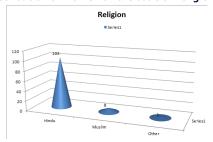


Fig. 3: Distribution of women on the basis of Education

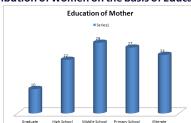


Fig.4: Distribution of women on the basis of Occupation



Fig. 5: Distribution of women on the basis of Socio Economic Status (B.G. Prasad Socio-Economic-Scale)

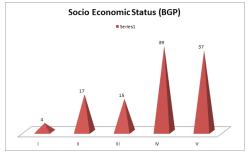


Fig. 6: Distribution of women on the basis of Type of Family

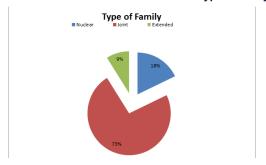


Fig.7: Distribution of women on the basis of Immunization coverage

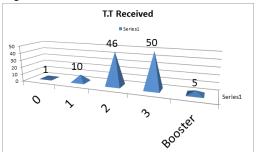


Fig.8: Distribution of women on the basis of number of ANC visits

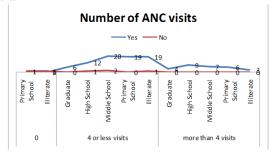
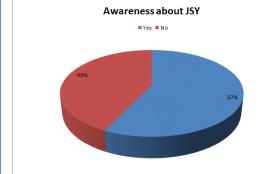


Fig.9: Distribution of women on the basis of awareness about JSY



DISCUSSION

Majority of the women (recently delivered or pregnant) belonged to low socio-economic status, 80% of the total interviewed women being housewives.

11% of these women were labourers by profession, working in Mills or as labourers in the Construction Industry. Only 4% of the Mothers were involved in agricultural work.

It was clearly seen that only 10 out of the 112 interviewed were graduates. 24 pregnant mothers were illiterate, therefore in more need of attention in terms of Birth Preparedness.

The villages in this part of the country, clearly depicted a Hindu majority scenario, also complying with the old traditional customs of a Joint Family (73%).

The role of ASHA's and AWWs has to be credited in terms of bringing these women to the nearby anganwadi centres for pregnancy registration & proper guidance.

In spite of all the measures taken, we found that 43% women were unaware about Janani Suraksha Yojana. Most of these women were residents of the 'Harijan muhalla'. i.e., what we know from history as area of the untouchables. So, it is a strange paradox we encountered during our survey. This is an area of great concern at National Level.

CONCLUSION & RECOMMENDATIONS

The data analysed and represented in pictorial form depicts and concludes that 43% of our rural women were unaware about the facilities of JSY. Majority of the registered pregnant women had less than 4 ANC visits. Only 55 out of the 112 interviewed women had received complete Inj. T.T immunization.

Four fifths of maternal deaths are due to direct causes: Haemorrhage, infections, complications related to unsafe abortion & hypertensive disorders3. We are in need for better mouth to mouth awareness programmes to educate all pregnant mothers about the importance of ANC services.

The ASHA/AWWs must check the number of dropouts of the registered cases from receiving full immunization and iron folic acid supplementation.

Local counselling must be done to seniors in the villages with help of the village head (Sarpanch) to bring the lower caste minorities with the mainstream, so as to avail the services of ANC. Women residing in the rural areas struggle for housing, livelihood and healthcare. Although the Government runs various policies to benefit these women, many are involved in agriculture, labour and other demanding works, ignoring their own health and that of their children. Mass media campaign has to be intensified.

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