

Determinants of Maternal Health Care Utilization among Ever-Married Rabari Women of Udaipur District, Rajasthan

Ayushi Sharma

Research Assistant, Miranda House, University of Delhi, New Delhi, India.

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ABSTRACT

Background: *Improving maternal health is one of the eight Millennium Development Goals. It is widely accepted that the use of maternal health services helps in reducing maternal morbidity and mortality. The utilization of maternal health services is a complex phenomenon and it is influenced by several factors. Therefore, the factors at different levels affecting the use of these services need to be clearly understood. The objective of this study was to estimate the effects of individual, community and district level characteristics on the utilization of maternal health services with special reference to antenatal care (ANC), skilled attendance at delivery and postnatal care (PNC)*

Methods: *The present paper focuses in understanding the maternal health care utilization by the ever married Rabari women of Udaipur District, Rajasthan. A purposive random sampling method was used to collect data from 122 ever married women of age group 15-49 years by using pretested and modified demographic schedule.*

Results: *The results of this study showed that 63.11% of the respondents used ANC during their most recent pregnancy whereas only 10.65% women received PNC within two weeks of delivery. In the last delivery, 36.06% mothers were assisted by doctors and 50.81% assisted by nurse. Regarding components of ANC utilization 85.24% women reported intake of IFA (Iron and Folic Acid) tablets during pregnancy, while 77.04% of the women received Tetanus Toxoid (TT) Injection. The study reflects that higher utilization of ANC services are there and PNC services are mostly neglected among the women. The study also reflected upon the use of Birth Control Measures (BCM) among the woman. The lesser number of sample size may bind us from recommending much. But, Mothers should be motivated continuously and with every generation of nation they give birth to, they should utilize such health services for the future of the healthy society.*

Keywords: Maternal health, antenatal care (ANC), post natal care (PNC), IFA (Iron and Folic Acid), Tetanus Toxoid (TT), Birth control measures (BCM)

Background

Maternal health refers to the “health of women during pregnancy, childbirth and the postpartum period” (WHO, 2014). Maternal Health is the health of women during pregnancy, childbirth, and postpartum period. It encompasses the health care dimensions of family planning, preconception, prenatal and postnatal care in order to reduce maternal morbidity and mortality. Improving maternal health is one of the eight Millennium Development Goals (WHO, 2005). According to estimates developed by the WHO, UNICEF, UNFPA and the World Bank, there were estimated 358,000 maternal deaths globally during 2008. Of the total estimated maternal deaths, developing countries accounted for 99% maternal deaths and with 63,000 cases in the year 2008, India had the largest number of maternal deaths in the world. Antenatal care is a type of preventive health care with a goal of providing regular check-ups that allow doctors or midwives to treat and prevent potential health problems throughout the course of the pregnancy. ANC ensures that pregnant women are provided with iron and folic acid tablets (IFA), proper immunization against tetanus and other ailments taken care of. The PNC services provided at the community level include counseling on family planning, breast feeding practices, early detection of postpartum complications and referral for such problems. The higher-level health care facilities provide these services as well as take care of post-delivery complications (Shariff, A., & Singh, G. 2002). Hence, maternal health is an important area of concern which if not cared might affect the child health too. This paper is an attempt to understand the maternal health care utilization by the ever married Rabari women of Udaipur District, Rajasthan.

Methodology

A community based household survey was conducted among Rabari Women. Data collection was done within six villages: RebariyokaGurha, LadiyoKhera, AalakiDhani, PeeplikiDhani, DedrokiDhani, Mariyoka Wada of Udaipur District, Rajasthan. Purposive random sampling method was used to interview ever married women. A total of 122 ever married women of reproductive ages between 15-49 years were selected for the study. Each woman was interviewed separately and the information was entered in the pretested and modified demographic schedule. Data entry was done followed by analysis.

Result and Discussion

An early age at marriage implies an early initiation of childbearing, which in turn implies a longer period of exposure to chances of bearing i.e. a woman who marry early are exposed to pregnancy for a longer period. In our study the mean age at marriage was found to be 15 years and the average age of menarche was found to be 14 years. And therefore the average age at first conception in the population is also very low which is found to be only 17.5 years. These factors influence the fertility of a population. The analysis yields the findings with regard to factors which affect the utilization of antenatal care, skilled attendance at delivery and postnatal care utilization. Not every woman has gone for antenatal check-up (ANC) and post natal check-up (PNC) due to the reason that they either have not conceived or have prenatal mortality. So the percentages have been calculated for the total number of women participating in ANC and PNC excluding the rest.

Table 1: Distribution of Rabari women with regard to factors which affect the utilization of ANC in the population:

ANC INDIACTORS	PERCENTAGE (no. of women)
IFA INTAKE FREQUENCY	
1) Regular	51.63% (63)
2) Occasional	31.96% (39)
3) Never	16.39% (20)
TETANUS INJECTION DOSES	
1) Complete	77.04% (94)
2) Incomplete	0.04% (5)
3) Never	18.85% (23)
ANTENATAL CHECKUPS (ANC)	
1) Regular	63.11%(77)
2) Occasional	22.13%(27)
3) Never	14.75%(18)

Antenatal Care- Knowledge and practice of antenatal care is evident among the Rabari women. The analysis yields the findings with regard to factors which affect the utilization of antenatal care in the population. The study reveals that 63.11% of women went for regular ANC and 22.13% of women went occasionally for antenatal care, on the other hand 14.75% of women never went for antenatal care. Regarding the utilization of ANC services,51.63 % of women were found to consume regular IFA tablets and 31.96% of women occasionally. Only 16.39% of women have never taken IFA tablets during pregnancy. In case of tetanus doses 77.04 % of women have taken complete tetanus injection and only 18.85 % of women never went for tetanus vaccination during pregnancy. In the present population majority of the woman has received maximum up to two Tetanus Toxoid injections. Few are the ones who have received only one. A similar study have been reported by Munuswamy, S. et al., (2014) in

which Rajasthan state, there around 75.1% women received Tetanus and 58.7% on the whole have IFA intake. It was also observed in one of the study by Singh, P., & Yadav, R. J., 2000 that 68% of pregnant women consumed IFA tablets and among them only 70.27% took them regularly.

Table 2: Distribution of Rabari women with regard to skilled attendance at delivery and PNC in the population:

PNC INDICATORS	PERCENTAGE
Place of Delivery	
1) Home	13.11% (16)
2) Hospital	86.88% (106)
3) Field or others	-
Person Assisting Delivery	
1) Doctor	36.06% (44)
2) Nurse	50.81% (62)
3) Dai	0.09 % (12)
4) Untrained Person	0.03 % (4)
Frequency of PNC	
1) Regular	10.65% (13)
2) Occasional	0.04 % (5)
3) Never	82.78 % (101)

Skilled attendance at delivery- The results of our study indicated that urban residence was found to be positively associated with receiving skilled attendance at birth. As depicted in the table, 86.88 % of delivery was at hospital and only 13.11% of delivery was at home. Maximum numbers of deliveries were assisted by nurses that is around 50.81% and rest 36.06 % were assisted by doctors.

Postnatal care-The overall use of postnatal care was found to be very low. Through our study it was found that only 10.65 % of women went for post natal checkups and rest 82.78% women never went for post natal checkups. It can be the influence of the tribal population and locality where the birth of child is given importance and not the mother’s health. The similar is the findings by Singh A, et.al.,(2012) in which PNC for both mothers and newborns was substantially lower than the care received during pregnancy and child birth.

Table 3: Utilization of Birth Control Measures (BCM) among Rabari women

No. of BCM users	17.50% (21)
No. of BCM non users	82.50% (99)
Type of BCM used	
Condom	19.04% (4)
Female sterilization	71.42% (15)
I-pills	9.52 % (2)

Birth Control Measures- According to the study there are only 17.50 % of women who opted for birth control measure, according to the data collected female sterilization i.e. Tubectomy was the most widely used method, accounting for 71.42 % of total current contraceptive-use and 19.04 % of women opted for condom, rest 9.52 % of women resided on pills. This ensures that maximum number of women of this tribe opt for the permanent family planning program.

Conclusion

This paper is just the reporting of ANC , PNC and some components of ANC in utilization of maternal health care services to the area. Nothing much can be derived as the sample size is small to recommend any suggestion. Although paper highlights analysis of factors affecting the use of maternal health services revealed interesting findings, which have very important implications for evidence based programming for maternal health. The paper concerned its focus towards highlighting the usage of ANC, PNC and BCM. The components of ANC will contribute to quality control of services. Benefits of ANC interventions and its proper utilization is a concern of health policy formulation and implementation. PNC helps the women with their post-delivery complications, if any and look for the health of the women. Family planning and use of birth control measures is explicit requirement considering the present population growth. Moreover such results help in formulation of better policies. The level of care sufficient in delivering high-quality care for pregnant women is really an important area of concern. Hence, mothers should be motivated to utilize such health services for the future of the healthy society.

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