USE OF ANTENATAL CARE SERVICES AND KNOWLEDGE AMONG BAIGA WOMEN IN MADHYA PRADESH

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ABSTRACT

This research article aimed to describe association between use of Antenatal care services and knowledge. A cross sectional study was carried out in 2009-10 with the sample of 500 ever married women. Out of them, 380 women experiences maternity during last five year and were interviewed for accessed for antenatal care and revealed that 72% women's received at least one antenatal checkups, and use of ANC services strongly associated (OR=3.177; C.I.;1-891-5.338) with the knowledge of MCH services. Out of 500 ever married women, only one-third (33.4%) had knowledge about the maternal and child health care services. The tribe have underutilize and low awareness of maternal health care services. The IEC intervention require to increasing awareness among women on the issues.

KEYWORDS: Antenatal, Knowledge, MCH Service, Baiga Tribe

Worldwide, maternal deaths 287,000 occurred in 2010. In developing country accounted for 99% (284,000) of total deaths. Among the developing regions, Sub Saharan Africa had the highest maternal mortality ratio (MMR) at 640 per 100,000 live births (Bloom et al., 1999). Largest numbers of women are dying due to factors related to pregnancy and child birth in developing countries. In developing countries like Ethiopia, utilization of maternal health care services still remains underutilized with a large majority of the births (90%) occur at home (Campbell and Graham, 2006). Maternal health care services are potentially one of the most effective health interventions for preventing maternal mortality and morbidity. In addition maternal health care gives opportunities for developing health information and services that can significantly promote the health of women and their infants. In addition, ANC has a positive impact on the utilization of postnatal health care services (Campbell and Graham, 2006), while PNC and intra-partum care significantly reduce maternal mortality because most death occur in the first week after delivery (Li et al., 1996 and Bhatia and Cleland, 1995). So for, access to reproductive health care is one target goal in improving maternal health since access to reproductive health care is crucial in reducing the likelihood of infections, haemorrhage and mortality due to complications of pregnancy and childbirth (U. N Millennium Development Goals Report, 2009). In this concern motherhood is often a positive and fulfilling experience for women, but it is also associated with suffering, ill health and even death in many cases (URL:http://www.who, access, in

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September, 2011). For the measuring of maternal health, maternal mortality ratio is high 269 in Madhya Pradesh than to Nation 212 (URL:http://dl.Dropbox.com, access in September, 2011). So for the study aimed to determinants of utilization of antenatal care services among mothers.

Information about the Baiga tribe; The Baiga is a historical primitive tribe of M.P known as expert axe men and depend on their axes for their livelihood on denizens of forest (Tewari,1984). These are mainly concentrated in baiga check of Dindori district, Madhya Pradeash which has a rural and tribal dominant population. Out of the total district population 95% lives in rural area and 65.33% area are tribal.

MATERIALS AND METHODS

A cross sectional survey was carried out with a probability proportion to size sampling procedure. The data was collected by trained investigators though structured schedule in the year 2009 -10. A total population 2258 of 460 households through 24 villages in three tribal blocks was surveyed. A respondent of 500 evermarried women were interviewed on utilization of maternal health care services and awareness on MCH issues. Out of them 380 women who had experienced maternity during last five year accessed the practices of maternal health care utilization. Information on ANC coverage was collected from women who had a live birth. A pre-structured and pre tested interview questionnaire envisaged by trained investigators. Prior starting interview, received informed written consent by respondent after explaining the content, purpose and procedure of the study. In the case of illiterate respondent, received consent in the form of thumbing. All responses were held in reserve confidential and anonymous. The data were analyse with SPSS software version 20.0.

RESULTS

Socio-Demographic Characteristics

The socio-demographic status of the study population explored as literacy rate was found 64%. The size of household was estimated 4.9% people per house. Women literacy was observed only 13%. Majority of people were lived in nuclear family (78.5%) and about 26% houses were electrified. About one-third (30%) of the family were using drinking water from stream/river. About 90 percent family were using kinds of fuel for cooking as wood. Maximum people were occupied in agricultural works while 0.1% engaged in government job (Table-1).

Background Characteristic of Women

Table 2 represents the distribution of background characteristics of women who had given birth during the five years preceding the survey. About 12% of the women were in higher parity with 5 children. A significant proportion (64%) of the women was illiterate. One can easily find out that majority of women (85%) were married

	$\mathbf{X}_{\mathbf{V}_{2}}$
Characteristics	Worth (%)
Total population	2258
Total Household	460
% of household electrified	25.9%
Literacy status	
Literacy of population	34%
Literacy of women	13%
Type of family; Nuclear	78.5%
Joint	21.5%
Source of drinking water; Well	38.3%
Hand pump	31.3%
Stream/ River	30.4%
Type of fuel using for cooking	
Wood	72.0%
Animal Dung	28.0%
Type of occupation; Agriculture	50.2%
Labor	24.4%
Govt. Service	0.10%
Household work	11.1%
Non worker	14.2%

Table 1 : Distribution of Socio-DemographicCharacteristics

before the age of 19 years. About 77% women were found in the age group of 20-34 years and about 94% women were married and 6% was widowed/ divorced. A mean age of the respondent was estimated 25 years for antenatal checkups.

Utilization of Antenatal Care Services

Important factors, cares during pregnancy (antenatal care) are much useful for save to mothers and baby. Out of 500 ever married women, 380 women were experiences maternity during last five year. Out of them 273 (71.8%) had taken at least one antenatal checkups. Consumption of IFA tablet and T.T immunizations was reported 68% and 76.3% respectively among women (Figure-1). The resources of ANC services by the women were received during home visit by ANM 59%, followed by PHC- Doctor (12.8%), at Health Institution 7.6% and private Doctor (5.2%). Due to lack of awareness, majority of first antenatal checkups was in the second trimester (43%). Out of total women who received ANC services, more than fifty percent of the women received ANC services during the pregnancy in the age group of 20-34 years, 6.1 percent in age group of 35-49 years and 10.8 percent in age less than 20 years. Utilization of ANC services were found considerably higher in age group 20-34 years (Table-3). Use of services by age at marriage less than 19 year of women were found likely higher by 4.2% than to age at marriage 19 years and above.

Association Between Use of Antenatal Care Services and Woman's Knowledge

In support of declining maternal and child mortality, every married woman must be aware regarding maternal and child health care services especially in rural and tribal area. To access the level of knowledge on MCH issues among women, A study were conducted through interview method. Those women who had knew at least two maternity care components out of listed five cares (Antenatal care, Tetanus Toxoide immunization, consumption of IFA tablet, institutional delivery and breast feeding only up to six month) were treated as they knew about MCH services. Total 500 ever married women in the reproductive age group of 15-49 years were interviewed regarding their knowledge on maternal and child health care services. About one third (33.4%) of women knew about the maternal and child health care services. However, the

S.	Maternal	Numbers of	Percent
No.	Variable	Women	
		(N=380)	
1.	Age group; <20	54	14.2
	20-34	293	77.1
	35-49	33	8.7
2.	Marital status;		
	Married	357	93.9
	Divorce	05	1.3
	Widow	18	4.7
3.	Education		
	Illiterate (no	242	63.7
	education)		
	Primary	75	19.7
	Middle+	62	16.4
4.	Parity(Birth		
	order);1	116	30.5
	2-4	218	57.4
	5+	46	12.1
5.	Age at		85.5
	marriage; <19	325	14.5
	>19	55	

Table 2 : Percent Distribution of Background Characteristic of Women

women with having knowledge of MCH services had a much higher prevalence of ANC use (84.7%) compared with 63.5% in the control (who have no knowledge of such services) Table,4. This suggest that use of ANC services strongly associated with the knowledge of MCH services among women (OR>1) with 95% confidence interval, It also supported with (X^2 =20.149, p<0.05).

DISCUSSION

Use of antenatal care services in our study was 71.8% which is similar to other study. The factors associated with ANC utilization were present age of women particularly middle age group (20-34) and women who had knew about the MCH services found significantly associated with the use of ANC services during pregnancy. This is reliable with a recent study from India that found ANC visits among the indigenous women of Jharkhand were three fold lower than the national average (Taguchi et al, 2003). Some studies from other countries have demonstrated that a women education is the most important determinant of ANC utilization. One important components of ANC services is to provide information and counsel

Table 3 : Distribution of Antenatal Checkups and Age Group of Women

Maternal Age	Antena	Total	
	Yes (%)	No (%)	
<20	41 (10.8)	13 (3.4)	54(14.2)
20-34	206(54.2)	87(22.9)	293(77.1)
35-49	23(6.1)	10(2.6)	33(8.7)
Total	270(71.1)	110(28.9)	380(100.0)



Figure 1 : Percentage of Women Taken of ANC Services

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Knowledge of MCH services	Use of ANC Services		Total			
	Yes(%)	No(%)				
Yes	127 (84.7)	23 (15.3)	150 (100.0)			
No	146 (63.5)	84 (36.5)	230 (100.0)			
Total	273 (71.8)	107 (28.2)	380 (100.0)			
Odds ratio(OR)= 3.177						
95% confidence interval=1.891-5.338						
Pearson Chi-Square test(X^2)= 20.149 on 1 d. f.; P=0.001						

Table 4 : Distribution of Women Knowledge and Use of ANC Services

women about birth preparedness and promote the important of institutional delivery, danger signs during pregnancy and other benefits of institutional delivery based on the principles of focused (Navaneetham and Dharmalingam, 2002). Community health volunteers' (CHVs) interventions should aim to improve maternal health status. This is because CHVs represent the community socioeconomically, culturally, experientially and linguistically. A barrier of poverty, rural setting, long distance to medical facilities and lack of means of transport in tribal area are responsible for that as well as low awareness on the issues.

CONCLUSION

It is well known fact that awareness is important factor for the use of any health care services. The findings revealed that women were underutilizing of antenatal care services and low level of knowledge of ANC services. Due to geographically condition (Remote and forest area), distance to medical facilities and non availability of transport were also one of the factor for not utilizing the health services for delivery and use of ANC services. Suitable IEC interventions in terms of helped in improving health education during the pregnancy, natal and postnatal period, with special emphasis on the low informative intensity.

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