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A study to assess the utilization of health care services in Primary Health Center regarding maternal and child health services among mothers of under five children in rural population, at selected PHC, Puducherry.

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Abstract: Maternal and neonatal mortality & morbidity continue to be high despite the existence of national programs for improving Maternal and child health (MCH) in India. A cross sectional descriptive research design and total of 230 mothers having under-five children were selected by simple random sampling technique. The data was collected by using semi structured questionnaire. The study results revealed that the most of them 230(100%) had not utilized the health care services in primary health centre by the basic maternal and child health services. These finding indicates the modern world is given prime importance for evidence based practice, so nurse researchers should extend their focus on knowledge of utilization.

Keywords: Mothers of under five children health care services, Puducherry.

1. INTRODUCTION:

In Women's life time, her health status during any phase of life impinges upon the next phase. When she gives birth, she passed on the gift of good health to the next generation. Therefore women's heath is important during all phases of their lives, from childhood to adulthood. (1)

Women and men combat many health challenges, which are alike; the differences are such that the health of women needs particular attention. Throughout human history, pregnancy and childbearing have been major contributor to death and disability among women. Maternal mortality is a key indicator of women's health and status in the society.

In developing countries, the most common causes of maternal deaths during the postpartum period are haemorrhage, infections and hypertension disorders. These conditions and any other life threatening or die bilitating conditions that may require urgent medical attention could be identified during PNC. Other services and information, such as maternal and child nutrition, Immunization, hygiene and sanitation can all be provided during PNC. It is however reported that less than 30% of women in developing countries receive PNC. (3)

Maternal health refers to the health of women during pregnancy, childbirth and the postpartum period. In any community mothers and children constitute an important and priority group especially in developing countries like India where vulnerability to morbidity and morality and amenability to prevention of ill health and morbidity, to a large extent, make them target group for special attention. By improving health of mothers and children in any society we contribute to a large segment of general population and it's because of this special and usually combined health services for mother and child, the maternal and child health services are globally more so in developing countries. (4)



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Maternal Health has its direct implications on families, communities and the entire country due to its insight no only on the health of women but immediate survival of new born and long term well being of Children they bare Maternal morbidity and morality have cost implications on family and community because of both direct and indirect costs and the hostile impact on productivity. (5)

Africa and Asia have a lion's share of over 90 percent of the maternal deaths world wide. India alone accounted for one quarter of all maternal deaths. For every woman who dies during pregnancy, approximately 30 more women suffer injuries, infections and disabilities during pregnancy or childbirth accounting at least 1million women a year. Most maternal deaths are preventable. In the developed countries, with good and easy access to special health care pregnancy and childbirth are rarely fatal events or results in disability. This scenario is contrary in developing countries where each journey of pregnancy is undirectional from which many women may never return the International Safe Motherhood Conference held at Nairobi in 1987 was a landmark event. The Safe Motherhood Initiative, aimed to haves maternal deaths by the year 2000. The initiative showed dynamic changes in the thinking of policy makers and practitioners and made safe motherhood an important component of interventions which are focusing on women's health and rights. ⁽⁶⁾

In most developing countries like India, utilization of maternal health care services has remained poor in spite of increasing public and private concerns on the provision of advanced health care. In view of the poor status of women, high maternal mortality besides questionable quality of services, exploring the factors affecting utilization of maternal health care services especially among young women needs urgent attention in the broader context of reproductive rights and human ethics. Women of reproductive age group are the most vulnerable segment of the population in terms of health issues, especially when they are going to be a mother. The maternal health refers to the health of women during pregnancy, childbirth and postpartum period. More than 350,000 women die annually from complications during pregnancy or childbirth, almost all of them 99 percent in developing countries. The decline rate of maternal mortality is very slow but the annual decline required rate is 5.5 per cent to meet the MDG target of reducing by three quarters the maternal mortality ratio by 2015. (7)

The Present study it was observed that the usage of antenatal services was higher with the enhanced in the literacy status of mothers and highest ANC usage was found among the literate mothers and the Utilization of health care services in primary health centre regarding maternal and child health services among mothers of under-five children in rural population.

2. MATERIALS & METHODS:

Design: Cross sectional descriptive research design was adapted for the present study.

Sample Size: 230 mothers having under-five children in the rural population area were selected for the study.

Sampling Technique: Simple random sampling technique was used to select the samples.

Data collection Procedure: The study was approved by the institutional research committee Member and institutional ethical committee members. Permission was send to the medical director of Puducherry. The permission was obtained from concerned authority. All participants were informed about the study. Informed consent was received from the participants. Data collection was carried out within the given period of 4 weeks at selected rural areas in Puducherry. Self-Introduction and information about the data collection to the participants, so as to get Co-operation in the procedure of data collection. The collected data were computerized and analyzed using SPSS version 25. The data was analyzed using descriptive statistics (distribution, mean, standard deviation) and inferential statistics (chi-square value test).

3. RESULTS:

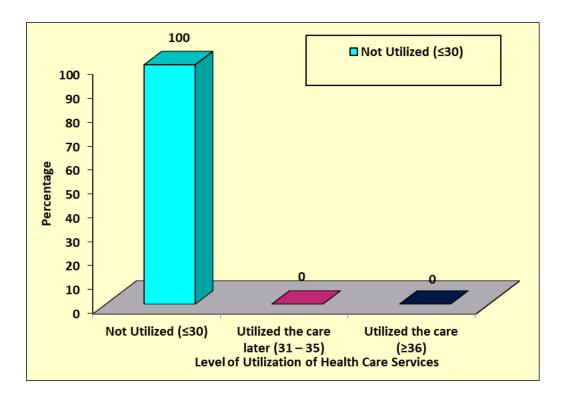
Frequency and Percentage distribution of demographic variables among mothers of underfive children . The majority of most of the mothers of underfive children, 123(53.6%) were aged between 21-25 years, 89(38.7%) of child were aged between 2 years -3 years, 148(64.3%) were female, 132(57.4%) had two children, 91(39.6%) had high school education, 141(61.3%) were housewives, 190(82.6%) had family monthly income of 10001-20000, 195(84.8%) belonged to nuclear family, 204(88.7%) were Hindus and 201(87.%) were residing in rural area..

Percentage distribution of level of utilization of health care services in primary health centre by the basic maternal and child health services by mothers of underfive children, all the mothers of underfive children, 230(100%) had not utilized the health care services in primary health centre by the basic maternal and child health services. (**Figure 1**)

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Figure 1: Percentage distribution of level of utilization of health care services in primary health centre by the basic maternal and child health services by mothers of underfive children.



The mean score of utilization of health care services was 16.55±2.26. The median score was 16.0 with minimum score of 14.0 and maximum score of 28.0(**Table 1**)

Table 1: Assessment of utilization of health care services in primary health centre by the basic maternal and child health services by mothers of underfive children.

(N = 230)

Utilization of health care services	Score
Minimum score	14.0
Maximum score	28.0
Median	16.0
Mean	16.55
Standard Deviation	2.26

The demographic variables age of the mother ($\chi^2=33.483$, p=0.0001), age of child ($\chi^2=19.655$, p=0.0001), educational status ($\chi^2=24.461$, p=0.0001), family monthly income ($\chi^2=25.874$, p=0.0001), type of family $(\chi^2=15.533, p=0.0001)$, religion $(\chi^2=14.625, p=0.0001)$ and residence $(\chi^2=23.075, p=0.0001)$ had no statistically significant association with level of utilization of health care services in primary health centre by the basic maternal and child health services by mothers of underfive children at p<0.001 level. The demographic variable number of children $(\chi^2=12.397, p=0.006)$ had statistically significant association with level of utilization of health care services in primary health centre by the basic maternal and child health services by mothers of underfive children at p<0.01 level.



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4. DISCUSSION:

A Cross sectional descriptive research design was used to this study. Total of 230 mothers having under-five children were selected by simple random sampling technique. The first objective was to assess the Utilization of health care services in primary health centre by the basic maternal and child health services by the mother of under-five children. The mothers of underfive children, 230(100%) had not fully utilized the health care services in primary health centre by the basic maternal and child health services. Maternal and neonatal mortality & morbidity to be high despite the existance of national programs for improving MCH in India. This could be related to several factors, an important one being non -utilization or under utilization of services, India, with more than 1.21 billion population, managed to reduce the maternal mortality ratio (MMR) From 600 per 100000 lives births in 1990 to 200 per 100 000 live births in 2010. However, the country still has the highest (20%) share of global maternal deaths and the prospect of achieving the millennium development goal (MDG)5 target by 2015 seems bleak. According to Indian government guidelines, every pregnant should avail for 3 or more antenatal care visits along with 90 or more IFA tablets and 2 or more TT injections.⁽⁸⁾

The second objective is to find the associate between selected demorgaphic variables with level of knowledge regarding utilization among mothers of underfive children. The study findings revealed that that the statistically singnificant association was not found between selected demographic variables with level of knowledge regarding utilization of health care services in primary health centre regarding maternal and child health services among mothers of under-five children in rural population, at selected PHC in Puducherry. Adhikari U et.al (2022) Descriptive survey research approach was selected for this study. All mothers under the study utilized Institutionl delivery and Immunization services for their children according to age. 65% of the mothers fully utilized health chech up services for their child during postnatal visit. Most of mothers (96%) recived education for exclusive breast feeding for 6 months. Integrated Child Development Services was fully utilized by 74% mothers. Maximum (51 %) of them fully utilized free treatment service for their children under JSSK.63.46% mothers fully utilized referral services. The study findings also show the presence of barriers among them like lack of awareness, lack of support person, financial barrier. (9)

5. CONCLUSION:

The study concluded that the most of that most mothers of under five children had not fully utilized the health care services in primary health center by the basic maternal and child health services. The nurse administration should support the staff for arranging regular health education regarding utilization of health care services in primary health centers. Nursing administration can organize support groups for mothers. Frequent educative, Expanded programme of maternal and child health services at selected PHC in Puducherry.

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