UTILIZATION OF MATERNAL HEALTH CARE SERVICES IN BELBARI VDC OF ESTERN REGION OF NEPAL

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Abstract:

Background: Appropriate utilization of maternal health care services is very important to reduce the maternal morbidity and mortality rate in the country and healthful practices while caring mother is needed to improve the health condition of both mother and child. Objectives: Main objectives of this study is to assess the utilization of Maternal health care services and know the cultural practices about care of mother and children of under one year of children. Methodology: Descriptive cross sectional study was conducted among 248 mothers of less than one year children on Belbari VDC of Morang district. Data was collected by using quantitative (house hold survey) and qualitative (focus group discussions and key informant interview) methods. Results: Among 248 mothers, 84% utilized the antenatal care services, 91% received TT vaccine during pregnancy. Most of them 80% had done delivery in health institutions. Conclusion: Based on proposed objectives of study, Utilization of maternal health care services should be reinforced in areas where corrections are needed.

Key words: Utilization, Mortality, Antenatal, Hospital, Children

Introduction

Maternal mortality ratio is one of the most important indicators of health. On the other

hand, it is a crucial health indicator of population. The health care that a woman receives during pregnancy, at the time of delivery and soon after delivery is important for the survival and well being of both the mother and the child. Global evidence shows that all pregnancies are at risk, and complications during pregnancy, delivery and the postnatal period are difficult to predict. Every year 529,000 maternal deaths occur worldwide as a result of pregnancy and pregnancy related complications. Among these deaths, 99% of deaths occur in countries.³Maternal developing

mortality in South-East Asia accounts for about 40% of global deaths. A large majority of women, particularly the poor and the marginalized, do not have easy access to such life-saving technologies.⁴

Maternal mortality of Nepal in 2006 was 281 per 100000 live births which are still high relative to developed countries. The coverage of antenatal care (ANC), delivery care and postnatal care (PNC) is important maternal health indicators. This study aims to provide scenario of utilization and practices of maternal and child health care and give some new additional information for development of new strategy on maternal and child health services to reduce maternal and infant mortality in the country.

Methodology:

Descriptive cross sectional study was conducted among mothers of under 1 yrs age of children of Belbari VDC of Morang district in Eastern Nepal. To collect the data quantitative (house hold survey) and qualitative (Focus group discussions and key informant interview) methods were undertaken for finding out the service utilization and practices. The structured and semi structured questionnaire and focus group discussion guidelines were used to collect information from community people. Key informant interview guideline was used to get information from health workers. Face to face interview with mothers and one focus group discussion (FGD) in each ward was conducted to collect the information needed for the study. Collected data was checked, rechecked and edited at the end of data collection and coding and categorization was done. Data entry and analysis was done using Microsoft Excel and SPSS version. Verbal consent was taken from the participants to participate in the study. Respondents were acknowledged for their participation in the study.

Results:

Table 1 shows the socio demographic variables of respondents. Most of them (90%) between the age of 20 to 35 yrs, majority 80% Hindu and more than half 53% were housewife followed by farmer (24%) and More than half (67%) were literate Among 248 women who had at least one child below one year, 208 (83.87%) had visited health facilities for antenatal check up (Fig 1). Among 208 mothers of doing antenatal checkup during pregnancy, 108 (52%)visited government hospital and 100 (48%) visited private hospital. Moreover 198 (91%) received TT vaccine whereas 10 (9%) not received. Similarly 181(87%) taken twice and 27(13%) taken only once TT vaccine. Among 248, it was found 198 (80%) had avoided some during pregnancy foods whereas remaining 50 (20%) had not. It was found that 134 (54%) had taken special food such as meat, egg, fruits, curd etc daily whereas remaining 114(46%) had not. Fig 2 shows the place of delivery, 198 among them (80%)institutional delivery whereas 50(20%) home delivery with the help of their family, relatives, health workers etc. There were total 248 live birth within one year, which comprises 116 for male baby and 132 female.

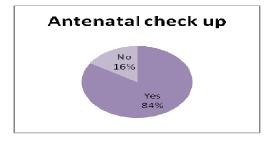


Fig 1: Distrtibution of utilization of Antenatal services



Fig 2: Distrtibution of place of delivery of respondents

Table 1: Distribution of Socio demographic variables of respondents (N=248)

| Characteristics | Categories | No | % |
|-------------------|----------------|-----|------|
| Age in years | < 20 | 10 | 4.03 |
| | 20 – 35 | 223 | 89.9 |
| | >35 | 15 | 6.04 |
| Ethnicity | Rai/ Gurung | 52 | 21 |
| | Chettri | 42 | 17 |
| | Brahmin | 31 | 12.6 |
| | Dhimal | 13 | 5.5 |
| | Newar | 10 | 3.6 |
| | Others | 100 | 40.2 |
| Religion | Hindu | 198 | 80 |
| | Kirat | 22 | 09 |
| | Buddhist | 12 | 05 |
| | Others | 15 | 06 |
| Education Status | Literate | 166 | 67 |
| | Illiterate | 82 | 33 |
| Educational level | S.L.C Above | 54 | 32 |
| | Below S.L.C | 194 | 78 |
| Marital status | Married | 248 | 100 |
| | Unmarried | 0 | 0 |
| Main occupation | Farmer | 60 | 24 |
| | Service holder | 12 | 5 |
| | Business | 20 | 8 |
| | Labourer | 25 | 10 |
| | Housewife | 131 | 53 |

Regarding the child rearing practices, it was found that among the total under one children, (92.7%) 230 child got colostrums feeding and rest (7.3%) 18 children were devoid of it. Reasons were 55% was due to lack of secretion of milk and rest 45% due to misconception. Forty two percent children were given supplementary milk feed and to rest of child not given.

According to our survey about 100 (40%) children got solid food before six months and rest 60% got after six months of age.

Discussion:

Maternal and child mortality is one of the most important indicators of health. Among health indicators, maternal mortality reflects great disparities between rich and poor. So, the health care that a woman receives during pregnancy, at the time of delivery and soon after delivery is important for the survival and well being of both the mother and child. Thus cross-sectional study was carried out to assess the factors associated with the utilization and practices of maternal and child health services among women of under one children. The present study indicates high rate of utilization of antenatal care services by women in the study area. It shows that 84% of women had made at least one antenatal visit during their last pregnancy. This is slightly higher than that of national average reported by Department of Health Services (67%) and National Demographic Health Survey 2006 (74%). This study found that twice more utilization of ANC service than reported by National Demographic Health Survey (NDHS) 2006 in Terai (43%). The high utilization of ANC might be due to the effective service delivery in the study area. 1,2,4.

The ANC utilization is lower than the study done in Karnataka, India (92.3%) by Metgud C S et al and other study in India (89%) by Singh P et al. ^{5,6} The findings of this study is similar to other studies done in Punjab by Abrol A et al and rural north India by Singh A et al. ^{5,7}The ANC utilization of this study is much higher than the study done in rural Bangladesh (59%) by Rahman Md et al and in Aligarh India by Das R et al. ^{8,9}.

The utilization of ANC in this study was three times more higher than the study conducted in terai district of Nepal (27%) by Jha N et al. ¹⁰ The present study shows that the most of the women (91%) had taken TT injection during their last pregnancy which is nearest to previously reported in terai area of Nepal by NDHS 2006 (85.9%). It is slightly higher than that

of Nepal (78%) as reported by NDHS 2006. Among TT users, 87% women had taken two doses of TT injection which is slightly more than the NDHS 2006 findings in Terai area (75%). But it is very high than that of Nepal as reported by Department of Health Service (49.5%) and in terai district of Nepal (43.7%) by Jha N et al. It is almost similar to the reported coverage of the Sisautiya health post (90.7%). 1,2,4,10,11.

The study done in rural areas of India by Hadi A et al showed that 91.7% of women had taken TT injection which is similar to study findings. 12 The present study shows that the most of the deliveries (80%) had taken place in the hospital and 20% of deliveries were conducted in the hospital. Institutional deliveries are higher than that of Nepal reported by DHS (15.3%) and NDHS 2006 (17%) in Terai. The institutional delivery is higher than that of previously in urban slum of New Delhi (68.2%) by Agrawal P et al and in North India (41.7%) by Singh A et al. 13,7.

High institutional deliveries in this study might be due to the availability of institutional staff at health facility and the others might be financial and transportation facilities at the study area. The majority of participants in focus group discussion were not taken supplementary food during their last pregnancy. Some women believed that supplementary food during pregnancy increases the size and weight of fetus and leads to difficulty labor. The food like milk was avoided during the pregnancy though it is rich source of vitamins and minerals. It was believed that the milk causes Pithari disease (white patches in the skin) in the new born. There was good practices of colostrum feeding apart from these cow milk, goat milk, honey,

water was also given for first 2 to 3 days because there was a belief that the quantity of milk is not sufficient for first 2 to 3 days. However, WHO guidelines recommended that babies be exclusively breastfed as many times as demanded for first six months of their life.¹⁴

Mothers' were provided with foods like preparation of ginger and turmeric might be good practice in the community. Awareness program should be conducted in the community to change or minimize the traditional harmful practices.

Conclusion:

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Though the utilization of maternal health care services like antenatal and delivery services are good in Belbari VDC but along with that utilization of post natal services should be put emphasis on. Feeding of colostrums to all newborn babies immediately after birth within one hour should be emphasized. Similarly healthful practices should give emphasis to and harmful practices like not taking proper nutritious food during pregnancy should be discouraged. Proper and timely weaning practices should be adopted.

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