

## Original Article

# HEALTH CARE SEEKING BEHAVIOUR AND AWARENESS OF MATERNAL AND CHILD HEALTH PRACTICES IN A RURAL VILLAGE OF MADHYA PRADESH

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## ABSTRACT

**Background:** The main goal of National Rural Health Mission is to reduce Infant mortality rate and Maternal mortality rate by promoting newborn care, immunization, antenatal care, institutional delivery and post-partum care. The study was conducted to assess health seeking behavior; common ailments; practices of maternal and child health care; and awareness about existing schemes for benefit of mother and child.

**Materials and Methods:** Study done by interviewing married male and female attending OPD at Raghogarh in Guna District (Madhya Pradesh) with the help of semi-structured questionnaire.

**Results:** The proportion of pregnant women who received at least 3 antenatal checkups was 51% ( $p > 0.05$ ). The coverage of women receiving tetanus toxoid and iron and folic acid was 92%. Out of which the coverage from government hospital was 56%, private hospital was 36% ( $p < 0.05$ ). The coverage of institutional delivery was 54%. The percentage of children immunized with the basic six vaccine preventable diseases was 85%. For contraception, 26% practiced tubectomy, 24% Oral Contraceptive Pills and 28% barrier method and 22% didn't answer. Only 38% subjects preferred utilization of government hospital facility, 62% had opted private hospital ( $p < 0.05$ ). Self medication in case of minor ailments was used by 57% of respondents.

**Conclusion:** It was found that about half of the total pregnant women had at least 3 antenatal checkups, 85% children were immunized, more than 50% deliveries were institutional, 22% people didn't respond regarding the practice of contraception.

**Keywords:** Health seeking behaviour, Maternal and child health practices

## INTRODUCTION

The Government of India launched "National Rural Health Mission (NRHM)" on 5<sup>th</sup> April 2005 for a period of 7 years (2005-2012). The mission seeks to improve rural health care delivery system. It is operational in the whole country. By making necessary changes in the basic health care delivery system the mission adopts a synergic approach by relating health to determinants of good health viz. nutrition, sanitation, hygiene, safe drinking water. The main aim of National Rural Health Mission is to provide accessible, affordable, accountable, effective and relative primary health care, and bridging the gap in a rural health care through creation of cadre of Accredited Social Health Activist (ASHA).<sup>1</sup>

According to National Family Health Survey (NFHS-III), only 51% women had at least 3 antenatal checkups, only 41% women had institutional deliveries and 49% deliveries were assisted by health professional. Vaccination coverage was 44%. These figures state that in spite of various health schemes in our country the statistics still remains discouraging due to poor utilization of these services.<sup>2</sup>

In developing countries 65% receive antenatal care services, 53% deliveries occur in health institutions and 30% receive some sort of post partum care.<sup>3</sup>

Maternal mortality is the one with widest discrepancies between the developed and developing countries. However monitoring progress towards maternal mortality reduction is difficult, therefore indicators set to

monitor progress is proportion of deliveries by skilled Birth Attendant.<sup>4</sup>

Roughly 3 million children die each year of vaccine preventable diseases (VPD'S) with a disproportionate number of these children residing in developing countries.<sup>5</sup>

Vaccines remain one of the most cost effective public health initiatives yet cover from VPD's still remains far from complete.<sup>6</sup>

Therefore, we can say that inspite of proper availability of services we still need to increase the awareness and utilization of the various Maternal and child health services.

## OBJECTIVES

The present study was planned to study the health seeking behaviour with respect to MCH care and common ailments, assessment of practices of maternal and child health care and awareness about existing schemes for benefit of mother and child amongst the persons living in a rural area of Raghogad village.

## METHODOLOGY

The study attempts to explore the pattern of utilization of RCH services for example antenatal care, safe deliveries, child immunization and contraceptive usage and utilization of various health schemes for maternal and child health care.

It is a cross-sectional study which was carried out in a rural village (SADA) of tehsil Raghogad in Guna district in M.P. (having a population of about 3000) in January 2011 during my rural posting in the Department of Community Medicine. Prior approval from the institutional ethical committee was taken before the start of study.

A pre-tested semi-structured questionnaire was used to interview married men and women of age group 15 - 45 years, who attended the OPD in the month of January 2011 in SADA hospital, Raghogad. Total 615 subjects were interviewed in one month period. Prior verbal consent was taken from each subject in study before giving him or her the pretested semi-structured questionnaire.

The questionnaire consisted of questions related to Health seeking behaviour for common ailments and maternal and child health care (MCH); MCH practices done; and knowledge about health care services and schemes available for MCH care.

## RESULTS

Out of total 615 OPD patients 436 were married and had at least one child and hence included in the study. There were 45% females and 55% males.

The proportion of pregnant women who received at least 3 antenatal checkups was 51% ( $p > 0.05$ ). The coverage of women receiving tetanus toxoid and iron folic acid was 92%. Out of which the coverage from government hospital was 56%, private hospital was 36% ( $p > 0.05$ ).

**Table 1: Health seeking behaviour for common ailments**

Health seeking behavior	Females	Males	P value
<b>Health care facility utilized</b>			
Government	23	15	0.015
Private	22	40	
<b>Transport</b>			
Public	16	23	0.523
Private	29	32	
<b>Self medication</b>			
Yes	22	35	0.138
No	23	20	

**Table 2: Health seeking behaviour with respect to maternal and child health care**

Health seeking behavior	Females	Males	P value
<b>Place of delivery</b>			
Government	35	19	0.013
Private	10	22	
Home	04	05	
Didn't answered	04	01	
<b>Immunization of children</b>			
Government	21	33	0.410
Private	16	15	
Not responded	08	07	
<b>Method of contraception</b>			
Tubectomy	26	--	0.000
Oral contraceptive	24	--	
Barrier contraceptive	12	16	
Not responded	12	10	

**Table 3: Knowledge about Janani Suraksha Yojna and Ladli Lakshmi Yojna**

	Females	Males	p value
<b>Knowledge about JSY</b>			
Yes	07	04	0.188
No	38	51	
<b>Knowledge about LLY</b>			
Yes	10	07	0.209
No	35	48	

JSY - Janani Suraksha Yojna; LLY - Ladli Lakshmi Yojna

The coverage of institutional delivery in government hospital was 54%, in private hospital was 42%, whereas 9% still preferred home deliveries and 5% didn't responded.

The coverage of children immunized against the six vaccine preventable diseases was 85%, out of which 54% were immunized in government hospital and 31% were immunized in private hospital and 15% didn't responded.

It was found that 78% of the people used different methods of family planning as Tubectomy practiced by

26%, Oral contraceptive pills used by 24% and barrier methods used by 28% people. While it was also found still a large proportion i.e. 22% of people didn't responded this question, may be because stigma and shyness.

It was also seen that during the time of sickness 38% people used government hospital facility, whereas 62% preferred private hospital facility ( $P < 0.05$ ). 61% respondents used private means of transport, whereas 39% still preferred to use government transport.

It was also found that in case of minor ailments 57% people used self medication and did not seek any medical advice.

Lastly it was found that 89% of the subjects didn't had knowledge about Janani Suraksha Yojna and its services and 83% didn't had knowledge about Ladli Lakshmi Yojna and its services.

## DISCUSSION

In our study it was observed that 38% of the population utilized government health facilities whereas 62% utilized private health facilities in case of illness (Table 1). Whereas in similar study done by Prakash Chandan et al. showed that out of the 40% of the population those who experienced any health problem, 2% received services exclusively from public health services, 53% exclusively from private services and 45% from both in rural areas. In urban areas, 3% used exclusively public health services, 57% from private health services and 40% used both of these.<sup>7</sup> Thus, it can be said the proportion of utilization of public/private facility is increased in present study because of more awareness and knowledge.

Regarding self medication in our study it was found that 57% of the population did self medication in case of minor ailments and 43% of the population seeks medical advice. Sharma Deepak et al.<sup>8</sup> observed that 49.3% of their study group seeks doctor's advice in case of medical needs. 35.61% would like to go to a private physician and 13.69% would like to go to government physician. 38.3% people told that they would like to consult a traditional healer and a doctor both. Here it can be said that the proportion of seeking self-medication and doctors advice in case of minor ailments still remains approximately same (50%) both in present and other studies.

It was found in our study that 54% people preferred government institutes at the time of delivery, 32% preferred private institutes, and 9% still preferred home delivery / delivery by a dai (Table 2). In a similar study by Kumar et al.<sup>9</sup> the utilization of various places of delivery in different sectors were Government (19.1%), Private (21.5%), Home (58.6%) and others (0.8%).

Another study done by Rajesh Garg et al. showed that delivery conducted by TBA were 45.39% , by doctor were 27.72%, by untrained dai were 7.19% by private

nurse were 15.55%, and by ANM were 4.16% of total 945 respondents.<sup>10</sup>

Here, it was observed that the proportion of institutional delivery whether government /private had increased in present study (54%, 32%) as compared to other study (19.1%, 21.5%) may be because of more awareness amongst the people regarding the advantage of institutional delivery. It was also found that the percentage of home deliveries in present study (9%) was much lower than other study (58.6%), which may be again due to increased awareness, knowledge, availability and accessibility of services near their homes and at affordable costs.

Regarding methods of Contraception it was found in our study that 26% of the females were sterilized and 24% used OCP's. Whereas 28% of the total population used barrier methods and 22% of the total population didn't answered for the same. (Table 2) Kumar et al<sup>9</sup> observed that female sterilization (80.4% in government services and 18% in private services), Vasectomy (78.4% in government services and 12.3% in private services), IUD/Cu-T/Loop (44.6% in government services and 53.7% in private services), OCP's (16.5% in government services and 78.5% in private services), Barrier method (condom) (13.5% in government services and 82.5% in private services). The percentage of using contraception had still increased in present study (78%) because of awareness, availability of some contraceptives by government free of cost and proper emphasis on counseling regarding contraceptives in health institutes. On the other hand it was also found that 22% of respondents didn't responded to this may be because of shyness or stigma or lack of awareness regarding the use of contraceptives.

In another study done by Sunita T H et al.<sup>11</sup> it was observed that inspite of 100% knowledge of contraception, only 48% women were actually using some kind of contraceptive measure. Contraception usage was higher in urban women (62.5%) whereas it was only (38.5%) in rural women. Also, 52% women interviewed were not using any contraceptive method. Two Indian studies showed 55% and 46% population was not using any contraceptive measures. It was also observed that 70.8% women adopted female sterilization as the method of choice.

## CONCLUSION

It is concluded from the present study that the practice and utilization of maternal and child health services had improved may be because of awareness, availability, accessibility of services and at affordable costs in a rural area. But still if we see some aspects like proportion of people not responding to the method of contraception used by them still remains high may be due to stigma, shyness or lack of awareness. Therefore, still more focus has to be given to educate more and more people and increase awareness amongst them. Lastly, it was also found that the awareness regarding the ma-

ternity benefit schemes like (LLY, JSY) still remain poor.

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