



ASSESS THE KNOWLEDGE AND UTILIZATION OF DR. MUTHULAKSHMI REDDY MATERNITY BENEFIT SCHEME AMONG WOMEN RECEIVING ANTENATAL SERVICES IN SELECTED URBAN HEALTH CENTRE AT CHENNAI.**MRS. G.BHUVANESWARI***Asst.Professor, Saveetha College of Nursing, Saveetha University, Thandalam***ABSTRACT**

Pregnancy is the vital event in life of a woman. It needs special attention from the time of conception to the postnatal period. During that period mother need more medical supervision and health services. Currently the Government is implementing many health interventions for antenatal mothers to provide quality care. The maternal health benefits encouraging mother to choose for institutional deliveries. The main aim of the study to assess the knowledge and utilization of Dr. Muthulakshmi Reddy maternity benefit scheme among women receiving antenatal services in selected urban health centre at Chennai. The main objective of the study is to assess the demographic variables and assess the knowledge on utilization among the mothers receiving antenatal service in selected urban health centre at Chennai. Descriptive research designs was adopted in this study, 60 sample were selected by the Non probability convenience sampling technique. The present study was conducted to assess the knowledge and utilization of maternity benefit scheme among antenatal mothers. In that majority of the samples had the 30% adequate knowledge, 17% mothers had inadequate knowledge, 30% mothers were had moderate adequate knowledge regarding the maternal benefit scheme. So we are the students and staffs of community health nurse department , should give the information about the benefits schemes through IEC activities and communicating the information to the public.

KEYWORDS: Antenatal Mothers , Knowledge, Utilization, Maternity Benefit Scheme**MRS. G.BHUVANESWARI***Asst.Professor, Saveetha College of Nursing, Saveetha University, Thandalam*

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INTRODUCTION

Maternal and child health refers to the promotive, preventive and curative and rehabilitative care of mothers and children.¹ Maternal and Child Health issues still continue to be a national and global health issue. Around 8 million women suffer pregnancy-related complications and over half a million die every year. Almost 99 % of all maternal deaths occur in developing countries and around two-thirds of maternal deaths in 2000 occurred in 13 of the world's poorest countries with India alone accounted for one quarter of all maternal deaths.² Worldwide, Maternal mortality ratio (MMR) ranges from 8/100,000 live births in developed countries to 500/100,000 live births in developing regions. There is gradual improvement in the scenario.³ In India, the MMR declined from about 520/100,000 live births in 1990 to nearly 254/100,000 in 2004-2006 and to 212/100,000 in 2007-2009, 178 IN 2010-2012.⁴ Despite this, the numbers of maternal deaths remained high, accounting nearly 56,000 pregnancy related deaths in the year 2010, the main cause being large number of deliveries were conducted at home by untrained persons.⁵ Concerned particularly with the maternal and neonatal health, the Government of Tamil Nadu launched various schemes to promote institutional deliveries from time to time. Currently the Government is implementing many health interventions for antenatal mothers to provide quality care. The maternal health benefits encouraging mother to choose for institutional deliveries.⁶ The health workers like village health workers, accredited social health activists are playing an important role in educating antenatal mothers to undergo regular antenatal checkups, nutrition supplementation and referring pregnant mothers for government hospitals to make mothers to get benefited from health services. One such new maternity benefit scheme is Dr. Muthulakshmi Reddy maternity benefit scheme.⁷ The main objectives of scheme were to reduce Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) through encouraging institutional deliveries; particularly in below poverty line families². Under this scheme cash incentives are given to women who obtain for institutional deliveries and also to the local health functionary who motivates the family for institutional delivery and helps them in obtaining ante-natal and post-natal services.⁸ The main components of the programme are mobilizing the community with the help of intervention worker and providing cash assistance as an incentive for institutional delivery as a mean to reduce maternal and neonatal death.⁹ In TamilNadu, Dr. Muthu Lakshmi Reddy Maternity Benefit Scheme funds is enhanced to Rs.12,000/-. Under the revised scheme, the total amount of Rs. 12,000 is being directly credited to the bank account of the mothers in three installments – a mother is eligible for receiving the first installment of Rs. 4,000 after minimum of three check-ups at the end of seven months, the second installment of Rs. 4,000 after the baby is delivered in a government institution and Rs. 4,000 when the baby completes immunization up to the third dose of DPT.⁶ The money will be given in three installments and will have to be used strictly for the mother's antenatal care and the baby's immunization.¹⁰ VHNs were responsible for identification of eligible antenatal mothers and their enrolment, delivery of baby and

child immunization.¹¹ Mere provision of a community health worker and cash incentives are not sufficient conditions for women to be motivated towards institutional delivery.¹² There are several other interacting factors which may play a role in creating a positive environment towards utilizing the services of the community worker and the hospitals.¹³ Some of the important factors like awareness, knowledge, attitude, utilization pattern and the satisfaction of the beneficiaries influence any program's success.¹⁴ These factors need to be studied for successful implementation of the programme. Researcher observed in her service area that the antenatal mothers unaware about the knowledge on the maternal health benefits provided from the government.¹⁵ The personal experience of researcher motivated to conduct a study regarding the maternal health benefit schemes which are provided from the government, to provide adequate knowledge and awareness to mothers regarding these health schemes and encourage mothers to get benefits available and there by promote the health status by choosing institutional delivery. To promote their health status and to choose institutional delivery.¹⁷ The objective of this study was to assess the demographic variables among the mothers receiving antenatal service and the knowledge and utilization of Dr. Muthulakshmi Reddy maternity benefit schemes among mothers receiving antenatal services in selected urban health centre at Chennai.

METHODOLOGY

Research Design: Descriptive Research Design

Setting: Selected Urban Health Centre at Chennai.

Population: Antenatal mothers who are all receiving the antenatal service at urban health centre at Chennai.

Sample: Antenatal mothers who are fulfilling inclusion criteria will be sample. Sample size is 60.

Sampling technique: Non probability convenience sampling technique.

Criteria for sample selection

Inclusion criteria

1. Antenatal mothers registered in the urban health centre
2. Antenatal mothers belong to low socio-economic status.

Exclusion criteria

1. Antenatal mothers who are not willing to participate in the study.
2. Antenatal mothers having more than two children.
3. Antenatal mothers already benefited from maternal health benefits scheme.

Ethical consideration

Ethical approval was obtained from the scientific review board. Informed consent was obtained from the medical officer and also from the mothers receiving the antenatal services at urban health centre.

Tool for data collection

Tool -I

The demographic data such as age, religion, educational status, monthly income of the family,

occupation, obstetrical score, previous exposure to information.

Tool-II Structured interview questionnaire to assess the knowledge of antenatal mothers regarding maternal health benefits scheme.

Date Analysis

The data collected & analyzed by means of descriptive and inferential statistics.

Descriptive statistics

1. Frequency, percentage distribution will be used to analyze the demographic variables of antenatal mothers regarding maternal health benefits scheme.
2. Mean, median, range and standard deviation will be used to analyze the level of knowledge of antenatal mothers regarding maternal health benefits scheme.

RESULTS

Among the 60 Antenatal mothers, 25(41.6%) belongs to the age group of 19 to 25 years, 30(50%) majority of antenatal mothers were in the age group of 26 to 30 years respectively. According to religion majority of antenatal mothers belongs to , 12 (20%) were Christian and 10 (17%) were Muslim, and Regarding educational status of the antenatal mothers 18 (30%) had schooling up to 10th standard, majority of the mothers completed the higher secondary education 27(45%), 15(25%) had completed the graduate degree, According to the occupation majority of the mothers were housewife 48 (80%). Only 12(20%) mothers were working. All antenatal mother belongs to below poverty line category. Out of 60 antenatal mothers 32(53.3%) had the prime mothers and 28 (46.6%) were 2nd gravid mothers. Regarding source of health information majority of them had the information received from health workers.

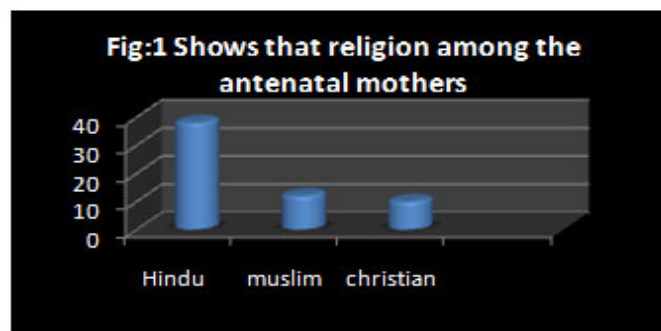
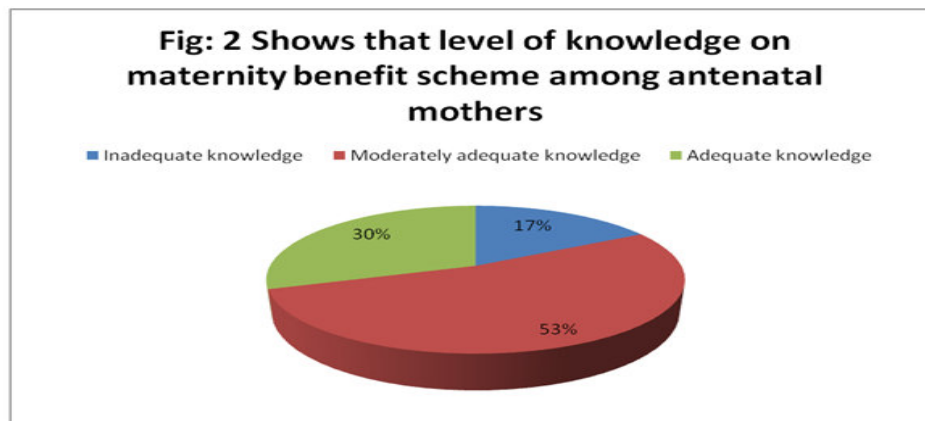


Table 1
Socio demographic variables among the antenatal mothers

S.No	Demographic variables	Frequency	Percentage
Age			
1.	a. 19-25 years	25	41.6%
	b. 26-30 years	30	50%
	c. 31-35 years	05	8.3%
Religion			
2.	a. Hindu	38	63
	b. Muslim	10	17
	c. Christian	12	20
Educational Status			
3.	a. Middle school	0	0
	b. High school	18	30
	c. Hr. Secondary school	27	45
	d. Graduate degree	15	25
Occupation			
4.	a. House wife	48	80
	b. Working women	12	20
Income of the family			
5.	a. 1000-2000/-	18	30
	b. 2001-3000/-	22	37
	c. 3001-4000/-	20	33
Obstetrical score			
6.	a. Prime mother	32	53
	b. 2 nd gravid mother	28	47
Source of health information			
7.	a. Mass media	05	8.3
	b. Relatives	10	17
	c. Health workers	45	75

KNOWLEDGE

Structured interview questions regarding the aware about of maternity benefit scheme and antenatal services and possible institutional care and immunization of child and case benefits, majority of respondents responded positively.



Utilization of services

Among 60 antenatal mothers to get the pig me number, and registered to the near by the health centre, she has to receive the antenatal services like, ANC investigation, Iron and folic acid, Tetanus Toxoid vaccination and ultra sound scan, she has to complete at least 3 antenatal visits and conducting institutional delivery, and immunization services of the child, and utilization of case benefits. Out of 60 antenatal mothers 45 (75%)

were had registered in the first trimester, 15 (25%) mothers were registered by after 12 weeks of pregnancy. 52(86.6%) had attended more than the 3 ANC visits. Among 60 antenatal mothers 32(53.3%) had got the first Rs.4,000/- case benefit. Among 60 antenatal mothers 45(75%) were found to be eligible for getting cash assistance under the Dr. Muthulakshmi Reddy maternity benefit scheme.

Table 2
Components of utilization of Dr. Muthulakshmi Reddy maternity benefit scheme by the study samples.

Components of ANC	Frequency	Percentage (%)
Registration of ANC		
a. I-Trimester	45	75
b. II - Trimester	15	25
Getting ANC services		
• ANC investigation		
• SCAN		
• IFA Tablets & TT vaccination	60	100
No. of ANC visit		
a. < 3	08	13.3
b. >3	52	47.7
Plan to Conduct institutional delivery		
a. Yes	58	96.6
b. No	02	4.4
Getting immunization to the child		
a. Yes	58	96.6
b. No	02	4.4

DISCUSSION

The present study was conducted to assess the knowledge and utilization of maternity benefit scheme among antenatal mothers. In that majority of the samples had the 30% adequate knowledge, 17% mothers had inadequate knowledge, 53% mothers were had moderate adequate knowledge regarding the maternal benefit scheme. So we are the students and staffs of community health nurse department , should give the information about the benefits schemes like IEC activities and communicating the information to the public. To create the awareness about the governmental maternal health benefits and their utilization through this to reduce the IMR and MMR & promote the institutional

deliveries, strengthened safe mother and childhood for the poor people in the society.

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CONFLICT OF INTEREST

Conflict of interest declared none.

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