

A Study on Ante Natal Checkups in the Coastal Villages of Agasteeswaram Block, Kanyakumari District

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ABSTRACT

Ante natal care is the care of women during pregnancy from the conception until delivery. It is considered as one of the four pillars of “safe motherhood initiative”. The main aim of pregnancy is to achieve, at the end, a healthy mother and healthy baby. The ante natal checkups are important for the health of the mother and outcome of pregnancy. This consists of routine checkups for mostly healthy pregnant women in order to identify signs and risks of disease and provide timely response. In 2001, WHO recommended that all pregnant women should have at least four ante natal checkups assessment by or under the super vision of a skilled attendant and in 2016, WHO recommend eight visits or contacts with skilled personnel during pregnancy. The researcher selected the Agasteeswaram block was selected as the study area. From this block five coastal (fishing) villages were selected for the study. There were 14 Anganwadi Centres functioning in these villages. There were 117 mothers who have registered their pregnancy for 3 months from June to August, 2018 and have one to three months old new born babies. The main objectives of the study is to discuss about the economic and demographic characteristics and the expenditure on ante natal checkups of the pregnant women respondents in the private hospitals.

INTRODUCTION

Women are strong pillars of any vibrant society. Motherhood is an event of joy and celebration for every family. Pregnancy is physiological process but it is associated with certain risks to the health and life of both the mother and baby. So, special attention and care should be taken for every pregnancy to make it safe. Ante natal care is the care of women during pregnancy from the conception until delivery. It is considered as one of the four pillars of “safe motherhood initiative”. The main aim of pregnancy is to achieve, at the end, a healthy mother and healthy baby. In the early 1900’s, ante natal care was introduced in high income countries and later spread to other countries without strong evidence on its effectiveness with regard to content, number and timings of ante natal care visits. The International Conference on Population and Development (ICPD) held in Cairo in 1994 reiterated the need for appropriate health care services that will enable women to go safely through pregnancy and child birth and to produce a healthy infant. “Pregnancy is special, let’s keep it safe” was the theme for World Healthy Day in 1998. Ante natal care is considered as one of the safe motherhood interventions. It is the systematic supervision of women during pregnancy to monitor the progress of foetal growth and to ascertain the well-being of the mother and the foetus. One of the most important components of ante natal care is to offer information and advice to women about pregnancy related complications and possible curative measures for the early detection and management of complications. In 2008, World Health Organization (WHO) and United Nations International Children’s Emergency Fund (UNICEF) recommended a minimum of four ante natal care visits to be undergone by the pregnant women. It is well established that taking ante natal care under the supervision of health care providers and giving birth in medical institutions promotes child survival and reduces the risk of maternal mortality. Promotion of maternal and child health has been one of the most important components of the Family Welfare Programme of the Government of India and the National Population Policy-2000 reiterates the government’s commitment to the safe motherhood programme within the wider context of reproductive health. The Millennium Development Goal (MDG) 5 can be reached by improving health care intervention such as ante natal care involving checkups both during and after pregnancy. It was appropriate if the following criteria were fulfilled: registration before 12 weeks, at least three or four ante natal checkups,

distribution of at least 100 iron folic acid tablets and the pregnant women should receive two doses of tetanus toxoid immunization.

The ante natal checkups are important for the health of the mother and outcome of pregnancy. This consists of routine checkups for mostly healthy pregnant women in order to identify signs and risks of disease and provide timely response. In 2001, WHO recommended that all pregnant women should have at least four ante natal checkups assessment by or under the supervision of a skilled attendant and in 2016, WHO recommend eight visits or contacts with skilled personnel during pregnancy. In India, the Reproductive and Child Health Programme (RCH) in 2005 recommended that a pregnant woman should have at least three ante natal checkups. The important services to be rendered during ante natal checkups include weight and height measurement, blood pressure records, abdominal examination along with general physical examination (GPE) and investigations to detect any complications.

OBJECTIVES OF THE STUDY

The objectives of the study are as follows:

1. To discuss about the economic and demographic characteristics and the ante natal checkups.
2. To assess the expenditure on ante natal checkups of the pregnant women respondents in the private hospitals.

METHODOLOGY

Kanyakumari district has nine blocks. Among these blocks, Agasteeswaram block was selected as the study area. From this block five coastal (fishing) villages were selected for the study. There were 14 Anganwadi Centres functioning in these villages (4 centres each in Kanyakumari and Kovalam and 2 centres each in Arockiapuram, Chinna Muttom and Keezha manakudy). There were 117 mothers who have registered their pregnancy for 3 months from June to August, 2018 and have one to three months old new born babies. The study depends solely on primary data. Primary data with respect to certain demographic features and number of antenatal checkups with the corresponding expenditure incurred by these mothers who have given birth to a child during June 2019 were collected. The collected primary data were incorporated into excel sheet for further analysis to fulfill the objectives of the study. Statistical tools like 'Chi-square Test' and 'Correlation' were employed to assess the primary data collected.

DATA ANALYSIS

Ante natal checkups

Ante natal checkup is a thorough examination; includes a variety of tests depending on the age and health of the pregnant woman. A pregnant woman can avail of an ante natal checkup by visiting a doctor or paramedical staff in a health facility or during home visits by a health worker or both. Ante natal checkups are important for the health of the mother and the outcome of pregnancy. Poor antenatal care may result in severe health problems of both the mother and prenatal baby. Demographic features play an important role in influencing the ante natal checkups. The researcher felt it essential to assess the association between the background variables and the number of ante natal checkups

Association between the background variables and the number of ante natal checkups

The association between the number of ante natal checkups and the important background demographic variables such as mother's education and religion of the respondents is studied with the aid of the Table furnished below.

Table-1: Number of ante natal checkups and the background variables

Back ground variables	Number of ante natal checkups				Total	χ^2	Df	Level of significance	Hypothesis
	3-5 times	6-8 times	9-11 times	12-14 times					
Mothers' education									
Secondary	1	2	10	1	14	290.753	12	1%	Rejected
High school	3	14	30	1	48				
Hr. Sec. School	5	12	8	1	26				
Graduate	5	4	8	4	21				
Others	1	2	4	1	8				
Total	15	34	60	8	117				
Religion									
Hindu	6	10	25	2	43	161.037	6	1%	Rejected
Christian	7	19	30	5	61				
Muslim	2	5	5	1	13				
Total	15	34	60	8	117				

Source: Primary data.

Table 1 reveals that, out of the 117 respondents, 30 (50.00 per cent) respondents having high school level of education received the ante natal checkups for 9 -11 times and majority of 30 (50.00 per cent) Christian respondents received the ante natal checkups for 9-11 times. For the association between number of ante natal checkups and mother's education, the calculated value of chi square is 290.753 which is much higher than the table value with 12 degrees of freedom at 1 per cent level of statistical significance. Therefore, the null hypothesis is rejected and it is inferred that there is association between number of ante natal checkups and mother's education. It is concluded that 50 per cent respondents having high school level of education have undergone ante natal checkups for 9-11 times. Regarding the association between religion and number of ante natal checkups, the calculated value of chi-square is 161.037 which is much higher than the table value with 6 degrees of freedom at one per cent level of statistical significance. Therefore, the null hypothesis is rejected and it is understood that there is association between the number of ante natal checkups and religion of the respondents. However, Christians were more familiar with undergoing ante natal checkups for 9-11 times.

Correlation between the monthly income of the respondents and expenditure made on ante natal checkups in private hospitals

The correlation between monthly income of the respondents and the expenditure on ante natal checkups in private hospitals is studied with the aid of the Table furnished below.

Table-2: Average monthly income and expenditure incurred by the respondents for ante natal checkups in private hospitals

Monthly Income (Rs.)	No. of respondents	Average monthly income per respondent (Rs.)	Average monthly expenditure on ante natal checkups per respondent (Rs.)	Percentage share of monthly expenditure from income	Correlation coefficient 'r'	Calculated value of 't'	Table value of 't'	Level of significance	Remarks
Below 6000	10	5300	500	11.20	0.796	18.13	2.58	1%	Significant
6000-7000	17	6400	770	12.05					
7000-8000	33	7500	860	11.43					
8000-9000	39	8700	990	11.41					
9000-10000	15	9400	1130	12.00					
10000 & above	3	10300	1280	12.46					
Total	117	47600	5530	11.62					
Average	-	7930	920	11.62					

Source: Primary data.

Note: Figures in columns 3 and 4 are rounded off to 10.

Table 2 shows that the monthly income per respondent varies from Rs. 5,300 to Rs. 10,300. The average monthly income works out to be Rs. 7,100; the monthly expenditure on ante natal checkups per respondent starts from Rs.594 and ends with Rs.1,283 and the average expenditure is Rs.938 and the percentage share of monthly expenditure from income on the ante natal checkups per respondent varies from 11.20 to 12.46. The average percentage share works out to be 11.62. The correlation coefficient between the variables (monthly income and expenditure on ante natal checkups) works out as 0.796 and it is significant at 1 per cent level of statistical probability. This means that there exists a high degree of positive correlation between monthly income and expenditure on ante natal checkups

FINDINGS

- Fifty per cent of the respondents having high school level of education had undergone ante natal checkups for 9-11 times and there is association between number of ante natal checkups and mother’s education of the respondents. Thirty (50.00 per cent) Christian respondents had undergone ante natal checkups for 9-11 times and there is association between the number of ante natal checkups and religion of the respondents.
- The correlation coefficient between the variables (monthly income and expenditure on ante natal checkups) works out as 0.796, indicating high degree of positive correlation between the study variables and the correlation coefficient is significant at 1 per cent level of statistical probability.

SUGGESTIONS

- Health workers need to identify the pregnant women and to advice them to take proper and prescribed ante natal checkups in the specified time.
- The respondents belonged to other religions (Hindu and Muslim) must also be made aware of undergoing prescribed ante natal checkups properly during pregnancy.
- As the ante natal period is a crucial period for pregnant women, these women must be directed to spend more on the medicines and prescribed food to give birth to a healthy baby.

CONCLUSION

The utilization of ante natal care services was found to be moderate. Awareness must be created among the women to make use of the available ante natal care services properly in the prescribed form. This will lead the pregnant women healthy and will pave the way for easy birth to a child in this study area.

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