

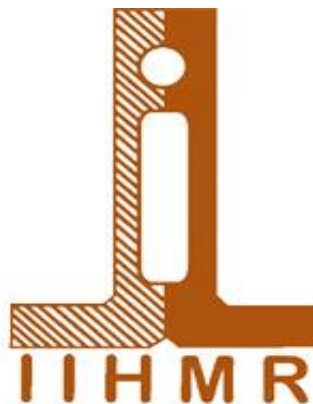
“Health Seeking Behaviour for Ensuring Safe Delivery and Preventing Obstetric Complication”

**A dissertation submitted in partial fulfillment of the requirements
for the award of**

Post-Graduate Diploma in Health and Hospital Management

By

Ms. Jai Shree Soni



**International Institute of Health Management Research
New Delhi -110075**

April, 2011

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Under the guidance of

Dr. Preetha GS

Designation: Asst. Professor

Organization: IIHMR, New Delhi



International Institute of Health Management Research
New Delhi -110075

April, 2011

Certificate of Internship Completion

Date:

TO WHOM IT MAY CONCERN

This is to certify that **Ms. Jai Shree Soni** has successfully completed his 3 months dissertation in our organization from January 17, 2011 to April 17, 2011. During this intern he has worked on

SUMA – Rajasthan White Ribbon Alliance for Safe Motherhood - “Birth Preparedness and Complication Readiness” Project as Project Coordinator under the guidance of me and my team at **Centre for Health Education, Training and Nutrition Awareness (CHETNA)**. During her period in the organization she shown greater responsibility, creativity good managerial skills in any of the task assigned to her. She was sincere, hard working, and open to learn.

We wish him/her good luck for his/her future assignments

Vd. Smita Bajpai

Programme Officer

CHETNA

Certificate of Approval

The following dissertation titled “**Health Seeking Behaviour for Ensuring Safe Delivery and Preventing Obstetric Complication**” is hereby approved as a certified study in management carried out and presented in a manner satisfactory to warrant its acceptance as a prerequisite for the award of **Post- Graduate Diploma in Health and Hospital Management** for which it has been submitted. It is understood that by this approval the undersigned do not necessarily endorse or approve any statement made, opinion expressed or conclusion drawn therein but approve the dissertation only for the purpose it is submitted.

Dissertation Examination Committee for evaluation of dissertation

Name_____Signature_____

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Certificate from Dissertation Advisory Committee

This is to certify that **Ms. Jai Shree Soni**, a participant of the **Post- Graduate Diploma in Health and**

Hospital Management has worked under our guidance and supervision. She is submitting this dissertation titled “**Health Seeking Behaviour for Ensuring Safe Delivery and Preventing Obstetric Complication**” in partial fulfillment of the requirements for the award of the **Post- Graduate Diploma in Health and Hospital Management**.

This dissertation has the requisite standard and to the best of our knowledge no part of it has been reproduced from any other dissertation, monograph, report or book.

Dr. Preetha GS

Asst. Professor

IIHMR

New Delhi

Date:

“Health Seeking Behaviour for Ensuring Safe Delivery and Preventing Obstetric Complication”

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Abstract

Introduction

Safe delivery is promoted primarily through the encouragement of all families to seek the care of skilled birth attendants for all births, because all pregnant women are at risk of life-threatening complications, many of which are unpreventable and unpredictable. Most childbirth complications cannot be predicted, and therefore, pregnant women and their families need to know what to do when an obstetric emergency occurs. Childbirth is one of the important events affecting health of a woman, especially in developing countries like India.

Women among rural population who received antenatal care were increased from 59% (NFHS-1), 60% (NFHS-2) to 72% (NFHS-3). Institutional deliveries increased by 7 percentage points between NFHS-2 and NFHS-3 (29%).

Review of Literature

Nearly 46% of the home births in developing countries happen without a skilled attendant and expose women to these risks if clean practices are not followed. More than 350 000 women die each year due to pregnancy and childbirth related complications. Nearly a quarter of the world's neonatal deaths take place in India. A woman dies from complications in childbirth every minute – about 529,000 each year -- the vast majority of them in developing countries. The District Level Health Survey estimates MMR of Rajasthan at 335 per 100,000 live births (DLHS-2008), still a long way from the NRHM Goal of reducing MMR to 100 by 2012.

Objectives:

To assess the measures taken by Current Pregnant Women and Lactating Mothers and their families to ensure safe child birth without any complications. To determine the knowledge,

attitude, and practices related to antenatal, intranatal and postnatal care among the pregnant women and their families/communities.

Data and Methodology

This study is quantitative and quantitative in the nature. The study was conducted in five villages in Osian of Jodhpur district. A sample size of 100 will be equally divided into five villages. Thus, 20 women from each selected village have been covered. In each selected village, 10 currently pregnant women and 10 Lactating Mother would be covered under this survey.

Results and Findings

Of all the covered LM, majority (78%) were in the 20-29 years age group. Among CPW, 68% were in 20-29 years age brackets. In the village Badala-basani all CPW were aware about antenatal care services. Status of knowledge of ANC was found better in Khetasar's (90%) and Gopasaria's CPM (90%). But Among the all LM from all villages was found poor especially in Khabada (50%). Lowest (10%) knowledgeable LMs were found in Khabada and Maandiyai-kala villages. 10% LMs of Khabada went for ANC that is very poor condition. Only 10 LMs went for 3+ ANC out of 50. Around 40-80 percent of women do not plan for place of delivery and additionally, almost more than half the women plan for Home delivery.

Recommendations

In future this kind of study is required to be conducted on the large scale for the further clarification. Perception of husbands and AWW/ASHA/ANM should be included in the study, so that their point of views would be taken. Family Planning, No. of children, socio-economic status and other are affecting the health seeking behaviour for birth planning and safe delivery, so in further studies correlation between them needed to be calculated. BCC material should be provided to LMs, CPWs, mother-in-lows and husbands.

Acknowledgement

It is always inspiring to work in the sector which is not much explored. The study provides me to understand in depth aspect of Maternal and Child Health and Health Seeking Behaviour of women and their family during pregnancy.

I hereby take this opportunity to thank Ms. Indu Capoor, Director CHETNA- **Centre for Health Education, Training and Nutrition Awareness** for granting me the opportunity to work as a Project Coordinator of SUMA-BPCR in esteemed organization that gave us the scope for playing an active role in different activities, which was a learning experience for me.

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Thank You,

Ms. Jai Shree Soni

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Abbreviations

CHETNA	Centre for Health Education, Training and Nutrition Awareness
MNGO	Mother Non Government Organization
FNGO	Field Non Government Organization
GRAVIS	Gramin Vikas and Vigyan Samiti
SUMA	Surakshit Matritava Gathbandhan
WRAI	White Ribbon Alliance India
CEDPA	Centre for Development and Population Activities
MoHFW	Ministry of Health and Family Welfare
FGD	Focus Group Discussion
ANC	Ante Natal Care
PNC	Post Natal Check up
JSY	Janani Suraksha Yojana
ANM	Auxiliary Nurse Midwife
ASHA	Accredited Social Health Activist
AWW	Anganwadi Workers
AWC	Anganwadi Centres
TBA	Traditional Birth Attendant
SBA	Skilled Birth Attendant
VHSC	Village Health and Sanitation Committee
PRI	Panchayati Raj Institution
PHC	Primary Health Centre

CHC	Community Health Centre
DLHS	District Level Household Survey
NFHS	National Family Health Survey
MMR	Maternal Mortality Ratio
IMR	Infant Mortality Rate
CPW	Currently Pregnant Women
LM	Lactating Mother
IEC	Information, Education and Communication
MIL	Mother-in-law
BPL	Below Poverty Line
IFA	Iron and Folic Acid
TT	Tetanus Toxoid
BCC	Behavior Change Communication