Original Research Article

Knowledge on Utilization of Maternal and Child Health Services among Rural Married Women

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ABSTRACT

Maternal and Child Health is recognized as one of the significant component of the family welfare. Maternal and Child Health services are essential and specialized services. More over, children are the asset for the family, community and nation where as, mothers have an important role in their growth and development. In spite of the wide spread infra structural facilities and service interventions in the rural areas, the morbidity and mortality among children continue to be a major cause of concern to the planning commissions. The focus seems to be the quality and level of utilization of services which are linked to the knowledge and availability of these services to the target population. Therefore the investigator planned to conduct the study to assess the knowledge among married women on utilization of MCH services.

The research approach adopted for this study was evaluative approach and one group pre and post test design. The independent variable is STP and dependent variable is knowledge on utilization of MCH services. The setting of the study was at selected rural areas of Tumkur district. The sample consists of 60 married women and convenient sample technique was used to select the sample. The findings of the study revealed that the overall knowledge score shows increase in mean post test knowledge 25.53 with SD 2.10 than mean pre test knowledge 14.52 with SD 2.63. Hence in all areas post test scores are increased so the hypotheses is accepted significant at p< 0.001 level. It shows that STP was effective in increasing the knowledge of mothers. There is significant relationship between ages, education of mother, family income, and no. of children with post test knowledge scores.

Keywords:- Knowledge, Maternal and Child Health Services, Structured teaching programme, Rural married women.

INTRODUCTION

The song of the mother to the baby at the cradle rings down to the body in the coffin”.

In India women in reproductive age (15-44 years) and children below 5 years of age comprise 60% of the total population. Women and children constitute a vulnerable section of the population, more so in a rural environment. Pregnancy is the vital event in the life of a woman. It needs special attention from the time of conception to the postnatal age. Mother’s health status during pregnancy and after delivery determines the health status of child. [1]

MCH was voluntary work coordinated by the maternal and child welfare bureau under the Indian Red Cross Society. The fifth 5 year plan for 1969-74 was the first to integrate family planning with MCH. Future efforts should focus on establishing the community as the focus of updated and well equipped services. Community volunteers will need to spread awareness and knowledge of family planning and maternal and child health services. [2]

The primary health care has a significant role in the process of a reproduction of the population and plays an important role in the improvement of
women’s health, as well as in the implementation of measures in the population planning policy. [3]

Health education programme regarding the importance of all maternal care services are clearly needed. There programme should address not only women of child bearing age but also care providers, MCH workers in particular. Town ship health centre should reach out and motivate, women to use their accessible services. [4]

The present health scenario in India depicts the enormous efforts made by its Government with the assistance of international agencies, in promoting the health of its population and in particular women and children. Various programme interventions in the form of maternal and child health services through the years have come to stay, to protect the health of mother and child. [8]

Statement of the problem:-
A study to assess the effectiveness of structured teaching programme regarding knowledge on utilization of MCH services among the married women of aged 18 – 35 years in selected rural areas of Tumkur district”.

Objectives:-
1. To assess the level of knowledge among married women regarding utilization of Maternal and Child Health Services.
2. To evaluate the effectiveness of structured teaching programme on utilization of Maternal and Child Health Services before and after implementation of STP.
3. To find out the association between the demographic variables with the knowledge on utilization of Maternal and Child Health Services.

Hypothesis :-
H1:- There will be a significant difference between the knowledge before and after the structured teaching programme.
H2:- There will be a significant association between the knowledge on utilization of MCH services and selected demographic variables

RESEARCH METHODOLOGY
Research Approach: An evaluate research has been adopted for the study.
Research Design: Pre-experimental i.e. one group pre-test and post-test design was adopted for the study.
Population: The population in this study included the married women aged 18-35 years who are living in Bovipallya which is attached to Urikere primary health centre comes under the jurisdiction of Tumkur District.
Sampling Technique: Convenient sampling technique, it is a type of non-probability sampling approach was found to be appropriate for the present study.
Sample Size: It consists of 60 rural married women includes pregnant women and mothers who had given birth to children.

Description Of the tool:-
SECTION - I: Includes items related to the demographic variables of the respondents about age, religion, educational status of women, occupation, income, number of children, health facilities available, distance of the health facility from the house of the women.
Section II: There were 30 questions. Each correct response carried score 1 and each wrong response scored 0. The maximum marks were 30 for total 30 questions.

RESULTS & DISCUSSION
To assess the pre test level knowledge regarding utilization of MCH services among rural married women,

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>No. of questions</th>
<th>Min –Max score</th>
<th>Pre-test knowledge Mean score</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antenatal services</td>
<td>8</td>
<td>0-8</td>
<td>3.52</td>
<td>44.0</td>
</tr>
<tr>
<td>Intra natal services</td>
<td>3</td>
<td>0-3</td>
<td>1.08</td>
<td>36.0</td>
</tr>
<tr>
<td>Post natal services</td>
<td>5</td>
<td>0-5</td>
<td>2.13</td>
<td>42.6</td>
</tr>
<tr>
<td>Family planning services</td>
<td>3</td>
<td>0-3</td>
<td>1.87</td>
<td>62.3</td>
</tr>
<tr>
<td>Child health services</td>
<td>11</td>
<td>0-11</td>
<td>3.92</td>
<td>53.8</td>
</tr>
</tbody>
</table>
Above table shows that 44% knowledge was there in antenatal services, 36% was there in intra natal services, 42.6% in post natal services, 62.3% in family planning services and 53.8% in child health services. It is evidenced that knowledge was good in family planning and child health services rather than antenatal, intra-natal, post natal services which shows that health education is essential to improve women knowledge on maternal care. It is evidenced that knowledge was good in family planning and child health services rather than antenatal, intra-natal, post natal services which shows that health education is essential to improve women knowledge on maternal care.

To assess the post test level of knowledge regarding utilization of MCH services after STP

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>No. of questions</th>
<th>Min – Max score</th>
<th>Post test Knowledge</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Mean ± SD</td>
<td>%</td>
</tr>
<tr>
<td>Antenatal services</td>
<td>8</td>
<td>0 - 8</td>
<td>7.07</td>
</tr>
<tr>
<td>Intra natal services</td>
<td>3</td>
<td>0 - 3</td>
<td>2.62</td>
</tr>
<tr>
<td>Post natal services</td>
<td>5</td>
<td>0 - 5</td>
<td>4.22</td>
</tr>
<tr>
<td>Family planning</td>
<td>3</td>
<td>0 - 3</td>
<td>2.52</td>
</tr>
<tr>
<td>Child health services</td>
<td>11</td>
<td>0 - 11</td>
<td>9.12</td>
</tr>
</tbody>
</table>

The above table shows that 88.4% knowledge was there in antenatal services, 87.3% was there in intra natal services, 84.4% in post natal services, 84% in family planning services and 82.9% in child health services.

It is concluded from the above table the post test score higher than the pre-test scores which indicates STP was more effective. Hence research hypotheses accepted at P<0.05 level of significance.

The overall knowledge score shows increase in mean post-test knowledge 25.53 with SD 2.10 than mean pre-test knowledge 14.52 with SD 2.63. Hence in all areas post-test scores are increased, so, the hypotheses is accepted. Hence it was proved that the Structured Teaching Programme was effective in improving the knowledge of the women regarding utilization of Maternal and Child Health Services.

To find out the association between knowledge with their socio demographic variables
was accepted for these variables. It shows non-significant relationship with religion, working status.

**CONCLUSION**

It was found that the main conclusion of the present study that in the pre test most of the subjects had adequate knowledge and after structured teaching programme most of the subjects gained adequate knowledge during post test. The study finds that structured teaching programme was highly effective.

The study results shows that there is significant association between the level of knowledge with their selected demographic variables such as age of the mother, educational status of the mother, family income, which was calculated by Pearson Chi square test at p<0.001. Therefore the investigator accepted hypothesis two.

**Recommendations**

1. Similar study can be conducted for a large sample and in different settings.
2. A comparative study can be conducted between rural and urban women.
3. Studies may be conducted to evaluate the effectiveness of STP versus other methods of teaching on utilization of MCH services.
4. A follow up study to assess the effectiveness of STP in terms of gain in knowledge and practice on utilization of MCH services.

**REFERENCES**


Mr. R. SreeRaja Kumar working as Associate Professor in School Of Nursing Sciences and Research, Sharda University, Greater Noida, Uttar Pradesh, India received Masters degree in the Community Health Nursing from Rajiv Gandhi University Of Health Sciences, Bengaluru, Karnataka.

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