



CHAPTER-19

TREND ANALYSIS OF MATERNAL COMPLICATIONS IN SUPAUL DISTRICT OF BIHAR OVER 8 MONTHS (1ST OCT'19 – 31ST MAY'20)

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INTRODUCTION

India's commitment to maternal health traces back to the initiation of the comprehensive Reproductive and Child Health (RCH) program in 1997, followed by its second phase in 2005. The primary objective was to reduce maternal and infant mortality. This initiative evolved into the Reproductive, Maternal, Newborn, Child Health, and Adolescent (RMNCH+A) strategy in 2013. While RCH concentrated on the reproductive health of mothers and children, the RMNCH+A strategy adopted a life cycle approach, emphasizing the incorporation of reproductive and adolescent health [1].

Several health programs have been introduced over the years to enhance maternal health. The Janani Suraksha Yojana (JSY) introduced in 2005 aimed to provide monetary benefits to pregnant mothers, assuming it would contribute to improving maternal health. However, with the launch of the Janani Shishu Suraksha Karyakram (JSSK) in 2009, the focus shifted towards enhancing maternal health through the provision of comprehensive services rather than just monetary benefits [2].

The Pradhan Mantri Surakshit Matritva Abhiyan (PMSMA) emphasized the early detection of reasons for maternal complications. This was achieved by strengthening Antenatal Checkups and diagnostics, moving away from identifying complications only at the time of delivery [3].

RESEARCH OBJECTIVES

1. To analyze, interpret, and integrate the data gathered on maternal complications in women within the Supaul district over the last 8 months.
2. To establish connections between the identified opportunities and challenges and subsequently address them in the most effective manner.
3. To provide recommendations for reducing maternal complications among women in the Supaul district.

RESEARCH METHODOLOGY

The study adopted a secondary research approach with a descriptive study design. The data used for analysis and interpretation in this thesis was sourced from information collected by block managers within their respective blocks of Supaul over a period of 8 months.

RESULTS & DISCUSSION

During the specified period, there was a continuous decline in the overall delivery load of health facilities in Supaul, which could be attributed to several factors. Firstly, the usual peak in delivery load observed in the months of November and December was affected in November'20 and December'20 due to lower mobilization of field workers, impacting awareness campaigns about institutional delivery. Additionally, a significant number of dedicated ambulances (102) were off the road, either due to payment issues or technical problems. Furthermore, the nationwide lockdown from March'20 to mid-May'20, a result of the global pandemic Coronavirus, created difficulties for expecting mothers in reaching specific institutions for institutional delivery, leading to an increase in home deliveries.

Out of the total deliveries conducted during this period, approximately 88% were normal deliveries, while 12% faced complications. The prevalence of complications can be attributed to the lesser skill of nurses in identifying possible complications. To address this gap and enhance technical expertise, continuous technical and hands-on sessions were conducted at both the district and state levels.

CONCLUSION

The district encountered challenges in improving overall institutional delivery rates. Even when an expectant mother came for institutional delivery, the chances of complications were higher due to the phobia associated with COVID-19. In the event of any possible complication, the staff at one facility was willing to refer the patient to another facility for treatment, thereby contributing to higher referral rates compared to direct management.

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