

# CHAPTER: 12

## A STUDY TO ASSESS THE EFFECT OF AWARENESS, FINANCIAL ASSISTANCE, AVAILABILITY AND ACCESSIBILITY OF HEALTH SERVICES ON UTILIZATION OF MATERNAL HEALTH SERVICES IN JHABUA DISTRICT

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## **INTRODUCTION**

Healthcare systems globally have consistently evolved in response to multiple factors, including advancements in medical technology and knowledge, greater access to information on health and healthcare services, shifts in health policy priorities to address changing disease and demographic trends, and the adoption of new organizational strategies and more complex financial mechanisms (Foundations of the system of health accounts, 2011). Health policymakers have had to adapt to these ongoing developments and anticipate future trends [1].

India, acknowledged as one of the world's fastest-growing economies, has also experienced substantial progress in its Human Development Index. Despite these advancements, maternal health indicators consistently lag behind expectations. Out of the estimated 358,000 global maternal deaths, approximately 63,000 are attributed to Indian women, making India the leading contributor to maternal mortality worldwide. States like Madhya Pradesh, Rajasthan, Assam, Uttar Pradesh, and others have significantly contributed to these statistics. Maternal health indicators are often considered a reflection of a nation's health system efficiency. Strengthening maternal health services is pivotal for improving both maternal and infant health outcomes [2].

In 2001, recognizing the importance of maternal health, the United Nations established the Millennium Development Goals, which included a target to reduce maternal mortality by 75% by 2015. Despite global efforts, achieving this target has been challenging for many nations, including India. However, these challenges underscore the ongoing need for sustained investments and focused initiatives to address maternal health disparities and enhance healthcare accessibility for women, particularly in high-burden states. As nations transitioned to the Sustainable Development Goals, ensuring maternal well-being remained a critical aspect, emphasizing the broader spectrum of healthcare services and socioeconomic factors

influencing maternal health outcomes. The continuous commitment to these goals is crucial to creating a healthier and more equitable future for mothers and infants in India and beyond [3].

## **RESEARCH OBJECTIVES**

1. To evaluate how financial aid from JSY, 24/7 health facility availability, all-weather road accessibility, and maternal education impact the use of adequate antenatal care services.
2. To investigate the influence of JSY financial assistance, round-the-clock health facility presence, all-weather road connectivity, and maternal education on institutional delivery service utilization.
3. To assess the impact of JSY financial aid, 24/7 health facility availability, all-weather road accessibility, and maternal education on the use of public institutional Caesarean section services.

## **RESEARCH METHODOLOGY**

The research undertaken was a descriptive cross-sectional study conducted in the Jhabua district of Madhya Pradesh from February 2016 to May 2016. The selection of the state and district was purposeful, with the researcher opting to concentrate on the Jhabua district in Madhya Pradesh. The primary aim of the study was to assess the impact of state health policies, factors related to health facilities, and the characteristics and perceptions of individuals on the utilization of maternal health care facilities. To gain a comprehensive understanding of the factors influencing maternal health service utilization, the study employed two distinct survey questionnaires formulated in the local language. These questionnaires addressed health policies and facility assessment on one hand and individual characteristics on the other. Random sampling was employed to select both the health facilities and ever-married women as the study subjects. This methodology facilitated a thorough investigation into

the various components influencing maternal health service utilization in the specified region during the designated study period.

## **RESULTS & DISCUSSION**

During the assessment, it was observed that facilities offering ANC care were present in all surveyed establishments, with 71.43% of them providing institutional delivery services. However, only 61% of these facilities were accessible via all-weather roads. In accordance with the scheme, ASHA workers were entitled to an incentive of Rs. 300 for each full ANC. The analysis revealed that 45.23% of the facilities disbursed less than sixty percent of the total amount allocated for ASHA payment. Additionally, 26.19% disbursed sixty to seventy percent, 11.19% disbursed seventy to eighty percent, 9.53% disbursed eighty to ninety percent, and 7.51% disbursed more than ninety percent of the total amount as ASHA payments. Similarly, under the scheme, institutional deliveries were incentivized with an amount of Rs. 1400 to each beneficiary. The analysis indicated that 52.38% of the facilities disbursed less than sixty percent of the total amount designated for JSY payment. Furthermore, 30.96% disbursed sixty to seventy percent, 9.53% disbursed seventy to eighty percent, and 7.15% disbursed eighty to ninety percent, while no facilities disbursed more than ninety percent of the total amount to the beneficiaries.

## **CONCLUSION**

The Health System Framework of Maternal, Neonatal, and Child Health was employed in the past study to explore the influence of JSY financial assistance, along with other health sector and household factors, in predicting the utilization of Maternal Health Services among women in the Jhabua district. The overall encouragement of services and the establishment of infrastructure were reported to result in increased utilization of Maternal Health services among the women of Jhabua district. Additionally, the study found that Maternal Education played a significant role as a predictor

of Maternal Health Services, with higher levels of education correlating with increased utilization. The findings within the state highlighted the complexity involved in designing Maternal Health interventions aimed at enhancing women's access to health services. The results suggested the necessity of carefully analyzing the district's context when developing interventions. Furthermore, the study emphasized the importance of leveraging existing resources to enhance access, quality, and equity in maternal care services.

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