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Original Research Article

A Cross Sectional Study of Awareness and Utilization of Janani Suraksha Yojana among Postnatal Women of Urban Slum

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ABSTRACT

Background: India contributes to 26% of the global burden of maternal deaths with nearly 1,36,000 women dying annually due to causes related to pregnancy and childbirth. Janani Suraksha Yojana (JSY) is a safe motherhood intervention under the overall umbrella of National Rural Health Mission (NRHM) was launched on 12th April 2005.Objectives of this study were to access the level of awareness and utilization of JSY services and to find out the factors influencing the utilization of JSY services among study population.
Materials and Methods: This community based cross sectional study was carried out for a period of one year in an urban slum area of Raichur. Information about awareness and utilization of JSY services from 380 postnatal women of age 15 years or above was collected through house to house visit.
Results: In this study, even though awareness of JSY was 332 (87.4%) among mothers, only 253 (66.6%) of the mothers utilized JSY service.
Conclusion: There is a need to improve the awareness about the utilization of JSY scheme among urban slum population. Health staff, Anganwadi workers and ASHA should be encouraged as they were the main persons in creating awareness about JSY.

Keywords: Janani Suraksha Yojana (JSY), Utilization, Urban slum, Awareness.

INTRODUCTION

Mother and child in a community constitute vulnerable group or special risk group, pregnancy and childbirth are special events in a women's life. But during this period they are more vulnerable to disease and death [1] India contributes to 26% of the global burden of maternal deaths with nearly 1, 36,000 women dying annually [2] due to causes related to pregnancy and childbirth. Many of these deaths could have been avoided if the pregnant women had sought full antenatal and timely delivery care. [3]

JSY is a safe motherhood intervention under the overall umbrella of National Rural Health Mission (NRHM) was launched on 12th April 2005.The main objective of JSY are, Reducing maternal mortality and infant mortality rate through encouraging deliveries at health institution and Focusing at institutional care among women of below poverty line. [1] JSY integrates the cash assistance with antenatal care during the pregnancy Period, institutional care during delivery and immediate post-partum period in a health centre by establishing a system of coordinated care by field level health worker. [4] The main objective of JSY are Reducing maternal mortality and infant mortality rate through encouraging

deliveries at health institution and Focusing at institutional care among women of below poverty line. [4]

The current scenario depicts that in spite of increased availability and easy accessibility of maternal health care services there is under utilization of maternal services especially among rural poor and urban slum populations for varying reasons. Though on average health indicators in cities score better than in rural areas the enormous social and economic stratification with in urban areas results in significant health inequalities. [5] Hence this study was planned to study the utilization of JSY services among study population and to find out the factors influencing the utilization of JSY services.

MATERIALS & METHODS

This community based cross sectional study was carried out for a period of one year from June 2010 to May 2011 in an urban slum area of. Raichur. All married women residing in Harijanwada slum area, who had delivered in one year period (June 2010 to May 2011), were included in the study. Thus total sample size was 380. Women who were not willing to participate in the study were excluded. A list of women, who had delivered during June 2010 to May 2011, was prepared with the information obtained from ANM/MPHW (F) and Anganwadi worker. Informed consent was obtained and data was collected by interviewing the women using a predesigned, pre-tested schedule. They were interviewed about their socio-demographic profile, awareness and utilization of JSY. Data was entered in a excel spreadsheet and analyzed by using SPSS software. The test applied was chi square test for proportions.

RESULTS

Total sample size was 380.The mean age of the mothers in the present study was 23.07 ± 3.37 years. As shown in Table1, majority of the mothers were in the age group of 20-24 years 222(58.4%) followed by 100(26.5%). most of the mothers were Hindus 338 (88.9%). Among all, 159) 41.8% were illiterate while 221 (58.1%) were literate. Majority of the mothers belonged to Class IV 216(56.8%) followed by Class V 98(25.8%), while only 23(6.1%) belonged to Class II according to Kuppuswamy classification. Most of the mothers were house-wives, 325(85.5%) and 55(14.5%) were working outside. 273(71.8%) of mothers belonged to joint family and 107(28.2%) belonged to nuclear family.

Table 1: Socio-demographic characteristics of the study group

Demographic characteristics	Frequency	Percent
Age (in years)		
15-19	40	10.5
20-24	222	58.4
25-29	100	26.3
30-34	14	3.7
35-39	4	1.1
Religion		
Hindu	338	88.9
Muslim	36	9.5
Christian	6	1.6
Literacy Status		
Illiterate	159	41.8
Literate	221	58.1
Socioeconomic status		
Class II	23	6.1
Class III	43	11.3
Class IV	216	56.8
Class V	98	25.8
Occupation		
Housewife	325	85.5%
Working	55	14.5%
Type of family		
Joint family	273	71.8%
Nuclear family	107	28.2%

In this study, as shown in Table 2, majority of mothers, 332 (87.4%) were aware of JSY and 48 (12.6%) were not aware of JSY. Majority 90.4% mothers got the information about JSY from Anganwadi worker, 1.2% from doctors, 6% from nurse and 1.5% from ANM.

Table 2: Distribution of mothers according to awareness about JSY

Awareness of JSY	Frequency	Percent
Yes	332	87.4
No	48	12.6
Total	**380**	**100**

As shown in Table No.3, even though awareness of JSY was 332 (87.4%) among mothers, only 253 (66.6%) of the mothers utilized JSY service, 55 (14.4%) did not utilize JSY and 72 (19%) were not eligible. Out of 55 (14.4%) mothers who did

not utilize JSY, 48(12.6%) of the mothers said they were unaware of it, 1 (0.3%) mother said, she did not have access to health center and 6 (1.6%) mothers said health staff was not cooperative with them. A total of 72 (19%) mothers were not eligible and so they were not entitled for JSY. Reasons for their non-eligibility for JSY were that 32 (8.4%) were home deliveries and 40 (10.5%) mother's age at delivery was less than 19 years.

Table No 3: Distribution of mothers according to utilization of JSY and reasons for non utilization of JSY

Utilization of JSY	Frequency	Percent
Yes	253	66.6
No	55	14.4
Reasons for not utilizing JSY		
Unaware	48	12.6
Not accessible	1	0.3
Health staff not cooperative	6	1.6
Not eligible		
Not eligible	72	19.0
Home delivery	32	8.4
Age at delivery was < 19 years	40	10.5

As shown in Table No 4, when utilization of JSY was compared with socio-demographic factors, utilization of JSY decreased with advancing age of the mother and with lower socioeconomic status. Mothers who were from joint families, housewives, literate and belonging to Hindu religion utilized JSY more.

Table 4: Association of socio-demographic factors with utilization of JSY

Mother's age	Utilization of JSY		Total (%)
	Yes (%)	No (%)	
20-24	161 (81.7%)	36 (18.27%)	197
25-29	64 (85.3%)	11 (14.66%)	75
30-34	21 (80.7)	05(19.2%)	26
35-39	07 (70%)	03 (30%)	10
Religion			
Hindu	214 (84.3%)	40 (15.7)	254
Muslim	33 (76.7%)	10 (23.3)	43
Christian	6 (54.5%)	5 (45.5)	11
Type of family			
Joint family	190 (81.2)	44 (18.5)	234
Nuclear family	63 (85.1)	11 (`4.9)	74
Literacy status			
Illiterate	104 (83.9%)	20 (16.1%)	124
Literate	149(80.9%)	35(19.0%)	184
Occupation			
Housewives	222 (84.1)	42 (15.9)	264
Working	31 (70.5)	13 (29.5)	74
SES			
Class II	14(70)	6 (30)	20
Class III	30(76.9)	9 (23.1)	39
Class IV	141 (82.5)	30 (17.5)	171
Class V	68 (87.2)	10(12.8)	78

DISCUSSION

Total sample size was 380.The mean age of the mothers in the present study was 23.07 ± 3.37 years and Majority of the mothers were in the age group of 20-24 years 222(58.4%) followed by 100(26.5%). most of the mothers were Hindus 338 (88.9%).Among all, 159) 41.8% were illiterate while 221 (58.1%) were literate. Majority of the mothers belonged to Class IV 216(56.8%) followed by Class V 98(25.8%), while only 23(6.1%) belonged to Class II according to Kuppuswamy classification. Most of the mothers were house-wives, 325(85.5%) and 55(14.5%) were working outside. 273(71.8%) of mothers belonged to joint family and 107(28.2%) belonged to nuclear family.

In this study, majority of mothers, 332 (87.4%) were aware of JSY and 48 (12.6%) were not aware of JSY. Majority of mothers, 90.4% got the information about JSY from Anganwadi worker, 1.2% from doctors, 6% from nurse and 1.5% from ANM. In a study conducted by Vikram K et al [6] the awareness regarding JSY scheme was 62.3 per cent (292), of whom 72 per cent (211) were not aware if they were eligible for monetary benefits under the scheme and majority of women (68%) came to know about JSY during the antenatal period and place of ANC (51.7%) and place of delivery (40.1%) acted as the major sources of information about JSY with ASHA acting as the third major source (25.7%).Other sources were neighbours (20.5%), relatives/family members (6.5%), media (3.1%) and others (2.7%). Similarly in a study conducted by Singh VS [7] more than half of women 58 (52.7%) knew that there exists a programme for pregnant women which aim at safe institutional delivery. But only 17.24% of them could tell the correct name of the scheme and sources of information were, ANMs-58.6%,AWWs-22.4% and ASHAs-17.2%.In another study [8] most of the respondents in rural area knew the scheme as it gives monetary gain if they opt for institutional delivery(84%) and their source of

information were ASHA and ANM. Kaushik A et al [9] found that though not even a single female included in the study knew the name of the scheme i. e. Janani Suraksha Yojana, 76% of the study subjects were aware about the fact that there is provision of benefit by the Government for those females who deliver in a public health facility.

In this study, even though awareness of JSY was 332 (87.4%) among mothers, only 253 (66.6%) of the mothers utilized JSY service, 55 (14.4%) did not utilize JSY. Out of 55 (14.4%) mothers who did not utilize JSY, 48(12.6%) of the mothers said they were unaware of it, 1 (0.3%) mother said, she did not have access to health center and 6 (1.6%) mothers said health staff was not cooperative with them. A total of 72 (19%) mothers were not eligible and so they were not entitled for JSY. Reasons for their non-eligibility for JSY were that 32 (8.4%) were home deliveries and 40 (10.5%) mother's age at the time of delivery was less than 19 years.

In a study conducted by Parul Sharma et al [10] utilization of JSY was found to be low in rural areas i.e. 38.7%.Similarly in a study by Sadhu D et al [11] among 865 beneficiaries, JSY knowledge was seen in 48.2% and utilized by 37.1%. Most common reason for its non-utilization was lack of awareness about the scheme 43.9%.In another study by Metgud [12] regarding utilization patterns of antenatal services among the pregnant women revealed that 39.52% of pregnant women were provided with full antenatal care. About 92.31% of pregnant women were registered for antenatal care but only 30% of them were registered in Ist trimester of pregnancy. A study conducted by Paras A et al [13] regarding maternal health care utilization among women in urban slum revealed that 76% received antenatal care and 68.2% of women had hospital delivery conducted by a doctor or a nurse, 27% thought that health checkup was not required, 17% had lack of knowledge about available services, 12% had financial constraints, 6% had fear of hospital care.Similarly in a study conducted by Sharma M K et al [14] regarding utilization of RCH services by urban population of Chandigarh revealed 72% deliveries took place at home of which 57% were delivered by untrained persons. Number of pregnant women immunized for TT was 77%.

In this study, when utilization of JSY was compared with socio-demographic factors, utilization of JSY decreased with advancing age of the mother and with lower socioeconomic status. Mothers who were from joint families, housewives, literate and belonging to Hindu religion utilized JSY more.

CONCLUSION

There is a need to improve the awareness about the utilization of JSY scheme among urban slum population. Health staff, Anganwadi workers and ASHA should be encouraged as they were the main persons in creating awareness about JSY.

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