

KNOWLEDGE AND UTILIZATION OF SAFE MOTHERHOOD SERVICES IN NEPAL

(A Case Study of Tharu Community in Khairahani VDC, Chitwan)



A Dissertation

Submitted to

Central Department of Population Studies
Faculty of Humanities and Social Sciences
For the Partial Fulfillment of Master's Degree of Arts
in Population Studies



By

Ambika Kaudal

Tribhuvan University
Kirtipur, Kathmandu, Nepal

2009

KNOWLEDGE AND UTILIZATION OF SAFE MOTHERHOOD SERVICES IN NEPAL

(A Case Study of Tharu Community in Khairahani VDC, Chitwan)



A Dissertation

Submitted to

Central Department of Population Studies
Faculty of Humanities and Social Sciences
For the Partial Fulfillment of Master's Degree of Arts
in Population Studies



By

Ambika Kaudal

Tribhuvan University
Kirtipur, Kathmandu, Nepal

2009

TRIBHUVAN UNIVERSITY
CENTRAL DEPARTMENT OF POPULATION STUDIES
KIRTIPUR, KATHMANDU, NEPAL

RECOMMENDATION LETTER

This dissertation work entitled "**Knowledge and Utilization of Safe Motherhood Services in Nepal: A Case Study of Tharu Community in Khairahani VDC of Chitwan District**" by Ambika Kaudal is prepared under my supervision for the partial fulfillment of requirement for the degree of Masters of Arts in Population Studies. To the best of my knowledge, the study is original based on primary data and carries out useful information on knowledge and utilization of safe motherhood services of Tharu community in Nepal.

April, 2009

Dr. Ram Sharan Pathak

Professor

Central Department of Population Studies
Faculties of Humanities and Social Sciences
Tribhuvan University

TRIBHUVAN UNIVERSITY
CENTRAL DEPARTMENT OF POPULATION STUDIES
KIRTIPUR, KATHMANDU, NEPAL

APPROVAL SHEET

This dissertation work entitled "**Knowledge and Utilization of Safe Motherhood Services in Nepal: A Case Study of Tharu Community in Khairahani VDC of Chitwan District**" by Ambika Kaudal has been accepted as partial fulfillment of the requirement of the Degree of Master of Arts in Population Studies.

Approved by

.....

Dr. Puspa Kamal Subedi
(Act. Head of CDPS, T.U.)

.....

Mr. Laxman Sing Kunwar
External Examiner

.....

Dr. Ram Sharan Pathak
(Supervisor)

ACKNOWLEDGEMENTS

This study would have been incomplete and worthless without continuous inspiration and guidance of respected and honorable teacher and dissertation supervisor Dr. Ram Saran Pathak, Professor at Central Department of Population Studies (CDPS), Tribhuvan University. I could not complete my dissertation without support and guidance of him. I am grateful to him for his greatness.

Similarly, I would like to express sincere gratitude to Prof. Dr. Bal Kumar K.C., Ex. Head of Central Department of Population Studies (CDPS) for his suggestions and encouragement to carry out this study. I would extend my thanks to External Mr. Laxman Sing Kunwar and all the faculty members of CDPS who supported me to complete this research work from various means.

I thank a lot to all the respondents for their active participation to answer the questionnaires curiously. I am thankful to Mr. Binod Paudel & Mr. Sagar Devkota for their cooperation to manage the data in computer.

I am indebted to my family members for inspiration and financial assistance to accomplish my academic career.

April, 2009

Ms. Ambika Kaudal

ABSTRACT

The study is based on primary data, collected from Tharu community in Chitwan district in 2008 which includes 110 reproductive age (15-49 Years) women as a sample size. The study was carried out up on the Tharu women of Surtana Village of Khairahani VDC-5, to determine the level of knowledge and utilization of safe motherhood services.

The main objective of this study was to examine the utilization of prenatal care, postnatal care and care during delivery and also to fine out the level of knowledge, perception and availability and accessibility of safe motherhood services. The main determinant variables for this research are antenatal check up TT Vaccination, receiving Iron and Vitamin A, Delivery Assistant place of delivery, Use of delivery Kit, Postnatal Check Up and Time to reach health services.

The studies include 660 populations from 110 household which consists 331 (48.64%) female and 339 (51.36%) male. The sex ratio was 105.61. The literacy rate of study population was 51.81 percent for female and 77.27 percent for male.

According to study 70.91 percent respondent received antenatal services. Higher percentages (51.28%) of respondent were received from health post. In this study 51.97 percent literate respondent were received antenatal cares. In the study 66.36 percent respondent received TT Vaccination, 62.72 percent received Iron Tablets, 28.18 percent received Vitamin A and 13.64 percent received Calcium. In the study 47.27 percent respondents were delivered at home. Only 54.55 percent respondents were used of delivery kits and 42.73 percent respondents were used sterilized blade to cut their new born baby's cord and 34.54 percent received postnatal care services.

This study found a strong positive relationship between education and knowledge, utilization and maternal health care services. There was significant relationship between receiving Iron Tablets, TT Vaccination, Vitamin A and Age at marriage, level of education and their husband.

TABLE OF CONTENTS

	Page No.
Recommendation Letter	I
Approval Sheet	II
Acknowledgements	III
Abstract	IV
Table of Contents	V
List of Tables	IX
List of Figures	XIII
Abbreviations	XIV
CHAPTER – ONE	1-8
1. Introduction	
1.1 General Background	1
1.2 Statement of Problem	3
1.3 Objective of the Study	6
1.4 Significance of the Study	6
1.5 Limitations of the Study	7
1.6 Organization of the Study	7
CHAPTER – TWO	9-17
2. Literature Review And Conceptual Framework	
2.1 Literature of Review	9
2.2 Conceptual Framework	16
CHAPTER - THREE	18-20
3. Methodology	
3.1 Selection of the Study Area	18
3.2 Questionnaire Design	18
3.2.1 Household type Questionnaire	18
3.2.2 Individual type Questionnaire	18
3.3 Sources of Data	19
3.4 Sample Size and Design	19
3.5 Methods of Data Collection	19

3.6	Validity and Reliability	20
3.7	Techniques of Data Analysis	20
CHAPTER – FOUR		21-31
4. Socio Economic And Demographic Characteristic of Study Household Population		
4.1	General Characteristics of Study Population	21
4.1.1	Introduction of Study Area	21
4.1.2	Introduction of Study Population	21
4.2	Socio-economic Characteristic of the Population	22
4.3	Level of Income by Main Sources	25
4.4	Level of Income by Extra Source	26
4.5	Demographic Characteristic of the Household	28
4.5.1	Age and Sex composition of the Household Population	28
4.5.2	Marital Status of the Household Population	30
CHAPTER – FIVE		32-39
5. Socio Economic And Demographic Characteristic of Respondents		
5.1	Educational Status of the Respondents and their Husband	32
5.2	Occupation Status of the Respondents	34
5.3	Demographic Characteristic of the Respondents	35
5.3.1	Age composition of the Respondents	35
5.3.2	Age at Marriage	36
5.3.3	Age at first Child Birth	37
CHAPTER – SIX		40-48
6. Knowledge And Perception About Safe Motherhood		
6.1	Knowledge about Safe Motherhood	40
6.2	Safe Motherhood knowledge by Level of Education	42
6.3	Safe Motherhood Knowledge by Age	43
6.4	Perception of Safe Motherhood	44
6.4.1	Perception of Safe Motherhood by Educational Status of Respondents	45
6.5	Availability and Accessibility	46
6.5.1	Accessibility of the Health Services	48

CHAPTER – SEVEN

49-72

7. Utilization of Safe Motherhood

7.1	Antenatal Services Utilization	49
7.2	Utilization of Antenatal Care by Age	50
7.3	Utilization of Antenatal Care by Education	51
7.4	Utilization of Antenatal care by Age at Marriage	53
7.5	Persons who suggested the respondents to utilize the Antenatal Care Service	53
7.6	Type of Health Service Facility where Respondent Obtains Antenatal Care	55
7.7	Types of Antenatal Care Received	57
7.8	Coverage of TT Vaccination	57
7.8.1	TT Vaccination and Educational Status	58
7.9	Coverage of Iron Tablets	59
7.9.1	Iron Tablets by Age of Respondents	60
7.10	Vitamin A by Age of Respondents	61
7.10.1	Vitamin A by Education of Respondent	62
7.11	Delivery Practices	64
7.11.1	Place of delivery	64
7.11.2	Utilization of Safe Delivery Kit	66
7.12	Postnatal Care	69
7.13	Postnatal care by Education	70

CHAPTER - EIGHT

73-79

8. Summary, Conclusion And Recommendation

8.1	Summary and Findings	73
8.1.1	Knowledge about Safe Motherhood Services	74
8.1.2	Antenatal Care	75
8.1.3	TT Vaccination, Iron Tablets and Vitamin A Tablets	75
8.1.4	Place of Delivery, Delivery Assistants and Utilization of Clean Delivery Kit	75
8.1.5	Postnatal Care	76
8.2	Conclusion	76
8.3	Recommendation	77

8.4 Area for further research	79
References	80-82
Appendices	83

LIST OF TABLE

	Page No
Table 4.1 Percentage Distribution of Household by Land Ownership	22
Table 4.2 Distribution of Agricultural Land	22
Table 4.3 Distribution of Household by Household Facility	23
Table 4.4 Distribution of Toilet Facility	23
Table 4.5 Distribution of Toilet Condition	24
Table 4.6 Percentage of Distribution of Household by Housing Condition	24
Table 4.7 Distribution of Household by Housing condition	24
Table 4.8 Distribution of population of Age 10+ by Occupational Status 2008	25
Table 4.9 Distribution of Household by level of Monthly Income	26
Table 4.10 Distribution of Household by Extra Source of Income	27
Table 4.11 Distribution of Level of Income by Extra Source	27
Table 4.12 Distribution of Household Population by Sex Selected Tharu, Chitwan	28
Table 4.13 Distribution of Household Population According to Sex by Five Years Age	29
Table 4.14 Distribution of the Household Population by Broad Age Group and Sex	30
Table 4.15 Distribution of Household population of Age 10+ by Marital Status and Sex, 2008	31
Table 5.1 Distribution of Respondents and their Husband by Educational Attainments	33
Table 5.2 Distribution of Household Population by Major Occupation	34
Table 5.3 Distribution of Respondent by Five Years Group	35
Table 5.4 Distribution of Respondents by Age at Marriage	36
Table 5.5 Distribution of Respondents by Currently Pregnant	37

Table 5.6	Distribution of Respondents by age at first Child Birth	38
Table 5.7	Distribution of Respondents by Number of Children Ever Born	38
Table 6.1	Distribution of Respondents by knowledge about Safe Motherhood	40
Table 6.2	Distribution of Respondents by Source of Information on Safe	41
	Safe	
Table 6.3	Safe Motherhood Knowledge by Level of Education	42
Table 6.4	Distribution of Respondent by Knowledge and Age	43
Table 6.5	Distribution of Respondent by Perception towards Safe Motherhood	44
Table 6.6	Distribution of Respondents by Perception and Educational Status	45
Table 6.7	Distribution of Respondent by Availability of Health Facility	46
Table 6.8	Types of Safe Motherhood related service provided by the Health	47
Table 6.9	Distribution of Respondents by Time taken to reach the Health Facility	48
Table 7.1	Distribution of Respondent by Antenatal Care Received During pregnancy by Age	50
Table 7.2	Distribution of Respondents According to Utilization of Antenatal Care by Education	51
Table 7.3	Distribution of Respondents According to Utilization of Antenatal Care	52
Table 7.4	Utilization of Antenatal Care	53
Table 7.5	Distribution of Respondents by persons who suggested utilizing the Antenatal care	54
Table 7.6	Distribution of Respondents by type of Health Services from which they Received Antenatal Care	55

Table 7.7	Distribution of respondent's number of month pregnant time of first Antenatal Care visit	56
Table 7.8	Distribution of Number of Antenatal Care visit	56
Table 7.9	Distribution of Respondents by type of ANC Service Received	57
Table 7.10	Distribution of Respondents by coverage of TT Vaccination	58
Table 7.11	Distribution of Vaccination by Education status	59
Table 7.12	Distribution of Respondents by Receiving Iron Tablets	60
Table 7.13	Distribution of Iron Tablets Received by Age of Respondents	60
Table 7.14	Distribution of Respondent by Vitamin	61
Table 7.15	Distribution of Vitamin A by Age of Respondents	62
Table 7.16	Distribution of Vitamin A received by Education Status of Respondents	63
Table 7.17	Distribution of Respondent by Calcium	64
Table 7.18	Distribution of respondent by Place of Delivery	65
Table 7.19	Distribution of respondent by Persons who assisted them at the time of Deliveries	66
Table 7.20	Distribution of Respondent by use of clean Delivery Kit	67
Table 7.21	Distribution of Respondents by Level of Education and Utilization	67
Table 7.22	Distribution of Respondent by Instrument used to cut the Cord	68
Table 7.23	Distribution of Respondent by the problem they face at the time of Delivery and Type of Problem	69
Table 7.24	Distribution of Respondent by Utilization of Postnatal care	70
Table 7.25	Distribution of Respondent by Postnatal Care and Literacy Rate	70

Table 7.26	Distribution of Respondents by place of Postnatal Checkup	71
Table 7.27	Distribution of Respondent after the Delivery of the first check takes the Places	71
Table 7.28	Distribution of Respondent by the problem after delivery of your last child	72

LIST OF FIGURE

	Page No
Figure 5.1 Distributions of Respondents by Currently Pregnant	37
Figure 6.1 Distribution of Respondents by knowledge about Safe Motherhood	41
Figure 6.2 Distribution of Respondent by Availability of Health Facility	47
Figure 7.1 Distribution of Respondent by Antenatal Care Received During pregnancy	50
Figure 7.2 Distribution of Respondents by persons who suggested utilizing the Antenatal care	54
Figure 7.3 Distribution of respondent by Place of Delivery	65
Figure 7.4 Distribution of Respondent by Utilization of Postnatal care	70

ABBREVIATIONS

AHW	:	Auxiliary Health Worker
AIDS	:	Acquired Immune Deficiency Syndrome
ANC	:	Antenatal Care
ANM	:	Auxiliary Nurse Midwife
CBS	:	Central Bureau of Statistics
CDPS	:	Central Department of Population Studies
DC	:	Delivery Care
DFID	:	Department for International Development
DOHS	:	Department of Health Services
EOC	:	Emergency Obstetric Care
FP	:	Family Planning
HA	:	Health Assistant
HIV	:	Human Immune Deficiency Virus
HP	:	Health Post
ICPD	:	International Conference on Population and Development
MCH	:	Maternal and Child Health
MCHWs	:	Maternal and child Health workers
MMR	:	Maternal Mortality Ratio
MoH	:	Ministry of Health
NDHs	:	Nepal Demographic and Health Survey
NFHs	:	Nepal Family Health Survey
NGOs	:	Non-Governmental Organizations
PHC	:	Primary Health Centers
PNC	:	Postnatal Care
PRB	:	Population Reference Bureau
SHP	:	Sub-Health Post
SPSS	:	Statistical Package for Social Science
SSMP	:	Support to the Safe Motherhood Program

STDs	:	Sexually Transmitted Diseases
STIs	:	Sexually Transmitted Infections
TBA	:	Traditional Birth Attendants
TT	:	Tetanus Toxoid
UK	:	United Kingdom
UN	:	United Nation
UNFPA	:	United Nations Fund for Population Activities
UNICEF	:	United Nations International Children Education Fund
VDC	:	Village Development Committee
VHWs	:	Village Health Workers
WHO	:	World Health Organizations
TAB	:	Trained Birth Assistant
FCHV	:	Female Community Health Volunteer