



A DESCRIPTIVE STUDY TO ASSESS THE UTILIZATION OF ANTENATAL CARE SERVICES BY MOTHERS DURING COVID-19 PANDEMIC IN SELECTED HOSPITAL AT KOLLAM

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ABSTRACT

A research project under took was “A study to assess the utilization of antenatal care services by mothers during COVID-19 pandemic in selected hospital at Kollam”. The objective of the study was to assess the utilization of antenatal care services by mothers during COVID-19 pandemic in selected hospital at Kollam. A quantitative approach was adopted for this study. The study was conducted among 100 mothers who delivered within 3 months in the Postnatal clinic and Paediatric OPD of Bishop Benziger Hospital at Kollam. In order to assess the utilization of antenatal care services among mothers, the study sample was selected by non-probability convenient sampling technique. The tool used for data collection consisted of demographic performa and structured questionnaire. The analysis of data was based on the objectives of the study using descriptive statistics. The findings of the present study revealed that majority of the mothers utilized antenatal care services during COVID-19 pandemic. Based on the finding the investigator have drawn implication which were of vital concerns in the field of nursing practice, nursing administration, nursing pattern and nursing education for future development.

KEYWORDS: Assess, utilization, antenatal care services, COVID-19 pandemic.

INTRODUCTION

Women are the primary caretakers of children and elders in every country of the world. International studies demonstrate that when the economy and political organization of a society change, women take the lead in helping the family adjust to new realities and challenges. They are likely to be the prime initiator of outside assistance, and play an important role in facilitating (or hindering) changes in family life.

Pregnancy comes with some cost a pregnant woman needs to be a responsible woman so as to best support the health of her future child. The growing fetus (the term used to denote the baby-to-be during early developmental stages) depends entirely on its mother's healthy body for all needs. Consequently, pregnant women must take steps to remain as healthy and well nourished as they possibly can.

Antenatal care (ANC) is one of the main components of maternal health. Low socioeconomic status, poor knowledge and awareness on obstetric complications, lack of decision-making autonomy, and limited health care options lead to under utilization of existing maternal health care service.

Maternal mortality is one of the major causes of death among women of reproductive age in developing countries. Globally, maternal death accounted to be approximately 99% deaths in developing regions. Despite Antenatal care (ANC) being one of the four major initiatives of the Safe Motherhood Initiative, its relative contribution to improving the maternal health morbidity and mortality still is uncertain and debatable. Nonetheless some of the ANC procedures have been found to be beneficial. World Health Organization (WHO) recommends a four-visit ANC schedule for low risk pregnancies. During these visits, the components of ANC suggested will include iron supplementation, blood and urine tests, at least two Tetanus Toxoid (TT) injections, blood pressure measurement, intestinal parasite drugs, and health education related to pregnancy and detection of the problems that make the pregnancy high risk one. It is difficult to predict which expectant mother will develop pregnancy related complications that is why it is essential that all pregnant women must have an access to high quality obstetric care throughout their pregnancies. Maternal complications and poor perinatal outcome are usually associated with other factors like non-utilization of antenatal and delivery care services and poor socioeconomic condition of the family.

Unwanted outcomes are seen in those mothers who have not done ANC registration compared to registered one.

Antenatal care (ANC) is an opportunity to promote a positive pregnancy experience and improved maternal and child survival. Care in the antenatal period is also important for supporting the long-term growth and development of the child as its part of the critical “1000” window. It serves as a facilitating platform linking the woman and her family to the healthcare system and possibly promotes higher utilization of essential services like breastfeeding and nutritional counselling, post-partum family planning and childhood vaccination.

All pregnant mothers must register for antenatal care at the nearest health facility as soon as aware of the pregnancy to assure healthy progress of their pregnancy and timely identify high risk issues affecting their health or their baby's well-being.

Globally, maternal and infant morbidity and mortality is a serious public health problem. Antenatal care is extremely important health care service for the mothers' and unborn foetus during pregnancy. It is well recognized that good antenatal care improves maternal, perinatal and neonatal outcome.

The major complications that account for nearly two-thirds of all maternal deaths are severe bleeding (mostly bleeding after childbirth), infections (usually after childbirth), high blood pressure during pregnancy (pre-

eclampsia and eclampsia), complications from delivery and unsafe abortions. Maternal Mortality Ratio (MMR) of India for the period 2016-18 is 113/100,000 live births, declining by 17 points, from 130/ 100,000 live births in 2014-16.

The WHO defined antenatal healthcare as the “care a pregnant mother receives before birth and involves screening, counselling/treatment of minor ailment and immunization services”. The COVID-19 pandemic caused considerable challenges for countries to maintain the provision of high quality, essential maternal and newborn health services. A study was conducted to assess the impact of the COVID-19 pandemic on antenatal care utilization among pregnant women attending public facilities in Northeast Ethiopia. The study revealed that 55% respondents missed or were late to start antenatal care services during the COVID-19 pandemic period. The majority of respondents had a fear of getting COVID-19 infection.

Statement of the problem

“A descriptive study to assess the utilization of antenatal care services by mothers during COVID-19 pandemic in selected hospital at Kollam”.

OBJECTIVES

- To assess the utilization of antenatal care services by mothers during COVID-19 pandemic in selected hospital at Kollam

Research approach	Quantitative approach
Research design	Non experimental descriptive design
Variables	Demographic variables: Age, education, occupation, religion, parity, source of information and support person Research variables: Utilization of antenatal care services by mothers during COVID-19 pandemic
Setting of the study	This study was conducted in the postnatal clinic and pediatric opd of Bishop Benziger Hospital, Kollam
Population	Mothers who delivered children within the period of first three months during COVID-19 pandemic at selected hospital Kollam
Sample	Mothers who were attended the postnatal clinic and pediatric opd of Bishop Benziger Hospital Kollam
Sample size	The sample size was 100 mothers who delivered children within the period of first three months during COVID-19 pandemic
Sampling technique	Non probability convenient sampling technique

RESULT AND DISCUSSION

Section A: Description of sample characteristics

Percentage wise distribution of sample according to age shows that 47% of mothers were in the age group of 26 to 30 years and 36% were in the age group of 18 to 25 years and 17% were in the age group of >30 years.

Percentage wise distribution of sample according to age at marriage shows that majority (80%) were married at the age between 18-25yrs and 17% were between 26-30yrs and 3% at >30yrs.

Percentage wise distribution of sample according to number of children shows that 53% were having one child, 40% were having 2 children, 7% were having 3 or more children.

Percentage wise distribution of sample according to type of family shows that 50% were from nuclear family and 46% were from joint family and 4% were from extended family.

Percentage wise distribution of sample according to religion shows that 42% were Christians and 33% were

Muslims and 24% were Hindus and 1% belonged to other categories.

Percentage wise distribution of sample according to their education shows that 3% had only primary level of education, 8% had secondary level education, 50% had higher secondary level education and 39% were graduates.

Percentage wise distribution of sample according to occupation shows that 63% were housewives and 22% were private employees and 9% were government employees and 6% were semi- government employees.

Percentage wise distribution of sample according to source of information shows that majority (80%) received information from individuals and 10% received through observation and 10% through social media.

Percentage wise distribution of sample according to support system shows that 50% used private services, 40% used government services and 10 % used semi – government services.

Percentage wise distribution of sample according to income of the family shows that 60% belonged to upper class, 30% belonged to upper middle class and 20 % belonged to lower middle class and 10% belonged to lower class.

Section B: Description of utilization of antenatal care services:

I. Antenatal care visit for pregnancy check up

Percentage wise distribution of mothers based on registration for antenatal care services shows that 100% had registered for antenatal care services.

Percentage wise distribution of mothers based on their visit to antenatal clinic shows that 100% had visited antenatal clinic.

Percentage wise distribution of mothers based on their number of antenatal clinic visit shows that 43% visited antenatal clinic 3 times, 15% visited 4 times and 42% visited more than 4 times.

Percentage wise distribution of mothers based on their first antenatal clinic visit shows that 50% visited during 2nd month of pregnancy, 30% during 3rd month of pregnancy and 20% during 4th and later month of pregnancy.

Percentage wise distribution of mothers based on their place for their place of checkup for last pregnancy shows that 51% visited government sector for last pregnancy check up and 49% visited private sector for the last check up.

Percentage wise distribution of mothers based on health problems during last month of pregnancy shows that

majority 75% had no health problems during last pregnancy and 25% suffered from health problems. Out of 100 sample, 1% suffered from anemia, 11% from hypertension, 1% from hypothyroidism, 1% from asthma, 7% from COVID 19, 3% from gestational diabetes mellitus and 1% from bleeding.

II. Utilization of medicines during pregnancy

Percentage wise distribution of mothers based on their consumption of iron and folic acid tablets during pregnancy shows that, all (100%) had consumed iron or folic acid during pregnancy.

Percentage wise distribution of mothers based on duration of intake of iron and folate tablets during pregnancy shows that majority (83%) consumed iron and folic acid tablet throughout their pregnancy, 8% from 1st trimester, 6% from 2nd trimester, and 1% till 7 month and 2% till 8 months.

Percentage wise distribution of mothers based on their intake of antihelminthics shows that 46% did not consume anti-helminthic, 34% did not remember and 20% consumed anti-helminthic.

Percentage wise distribution of mothers based on TT vaccine taken during pregnancy shows that all (100%) had taken TT vaccine.

Percentage wise distribution of mothers based on number of dose (TT vaccine) taken shows that majority (96%) were vaccinated with 2 dose of TT and 4% were vaccinated with 1 dose.

III. Screening test during pregnancy

Percentage wise distribution of mothers based on screening test done shows that all (100%) had done screening test. 100% had done USG scanning and viral marker, 15% had done anomaly scan, 8% had done double marker, 3% had done HbA1c and 2% had done NT scan.

IV. Utilization of antenatal counselling session

Percentage wise distribution of mothers based on attending antenatal counselling session attended shows that 54% did not attend ANC counselling session and 46% attended ANC counselling.

Percentage wise distribution of mothers based on number of attending antenatal counselling session attended, 24% attended ANC counselling only once, 17% attended 2 times and 5% attended more than 2 times.

V. Overall satisfaction with the antenatal care services

Percentage wise distribution of mothers based on overall satisfaction with antenatal services shows that 65% were partially satisfied, 30% completely satisfied and 5% dissatisfied with antenatal care services.

DISCUSSION

The present study was conducted to assess the utilization of antenatal care services by the mothers in selected hospital at Kollam. In order to achieve the objectives of the study non experimental descriptive study design was adopted and the subjects were selected by the non-probability convenient sampling. The sample consisted of 100 mothers who delivered children within the period of first three months during COVID-19 pandemic attended postnatal clinic and paediatric OPD.

The findings are discussed based on following objective

- To assess the utilization of antenatal care services by mothers during COVID-19 pandemic in selected hospital at Kollam.

Assess the utilization of antenatal care services by mothers during COVID-19 pandemic in selected hospital at Kollam.

I. Antenatal care visit for pregnancy check up

- 100% had registered to antenatal care services.
- 100% had visited antenatal clinic.
- 43% visited antenatal clinic 3 times, 15% visited 4 times and 42% visited more than 4 times.
- 50% visited during 2nd month of pregnancy, 30% during 3rd month of pregnancy and 20% during 4th and later month of pregnancy.
- 51% visited government sector for last pregnancy check up and 49% visited private sector for the last check up.
- Majority (75%) had no health problems during last pregnancy and 25% suffered from health problems. Out of 100 sample, 1% suffered from anemia, 11% from hypertension, 1% from hypothyroidism, 1% from asthma, 7% from COVID-19, 3% from gestational diabetes mellitus and 1% from bleeding.

II. Utilization of medicines during pregnancy

- All (100%) had consumed iron or folic acid during pregnancy.
- Majority (83%) consumed iron and folic acid tablet throughout their pregnancy, 8% from 1st trimester, 6% from 2nd trimester, and 1% till 7 month and 2% till 8 months
- 46% did not consume anti-helminthic, 34% did not remember and 20% consumed anti-helminthic.
- All (100%) had taken TT vaccine.
- Majority (96%) were vaccinated with 2 dose of TT and 4% were vaccinated with 1 dose.

III. Screening test during pregnancy

- All (100%) had done screening test. 100% had done USG scanning and viral marker, 15% had done anomaly scan, 8% had done double marker, 3% had done HbA1c and 2% had done NT scan.

IV. Utilization of antenatal counselling session

- 54% did not attend ANC counselling session and 46% attended ANC counselling.
- 24% attended ANC counselling only once, 17% attended 2 times and 5% attended more than 2 times.

V. Overall satisfaction with the antenatal care services

- It was found that 65% were partially satisfied, 30% completely satisfied and 5% dissatisfied with antenatal care services.

CONCLUSION

The present study aims to assess the utilization of antenatal care services among mothers in selected hospital at Kollam. The data revealed that majority of the mothers registered to antenatal services and visited antenatal clinics. 40% of mothers were completely satisfied, 60% were partially satisfied with antenatal care services.

RECOMMENDATION

Based on the findings of the study, it is recommended that a similar kind of study can be conducted for a large group.

A descriptive study can be conducted to assess the effectiveness of standard teaching programme on knowledge regarding the utilization of antenatal care services to the mothers during COVID -19 pandemic. The optimal utilization of e- consultation and virtual ANC consultation can be encouraged during COVID- 19 outbreak.

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