

Survey Report on Quality of Maternal and Child Health Care in Area of Shivaji Nagar, Satpur, Nashik

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Abstract: Maternal and Child Health Care is to protect and promote the Health of Mother and Child. Health of mother before, during, after the delivery plays a vital role in Maternal Mortality Rate. Education and implication of proper nutrition, family planning and vaccination may help to reduce the maternal and children mortality rate. The event aimed to assess the health status of mothers and children in the community while providing essential medical services to improve their well-being.

Keywords: Mother Child Health Care, Vaccination, Family Planning.

Introduction: Maternal and child mortality remains a global concern, particularly in low and middle income countries [1, 2]. The maternal mortality ratio is one of the highest in Asia with 197 deaths per 100,000 live births [3]. Maternal and Child Health not only helps to protect but also to promote the health of Mother and Child. Although high facilities or interventions are available but not utilizing by Community. Many women give birth at home and may not see the skilled health care worker before, during or after delivery. Whereas children are much more prone to disease and need adequate nutrition. Education related to proper nutrition, family planning, vaccination may help the maternal and child healthy.

Objective:

The primary objectives of the survey and medical camp were:

1. Evaluate the health conditions of mothers (DHCS AREA)
2. Promote awareness about vaccination in children among the population.
3. Utilization of Government or Private Health Facilities for delivery.
4. To evaluate the methods of contraception's used in the population under survey.

Design: Descriptive Cross Sectional Survey.

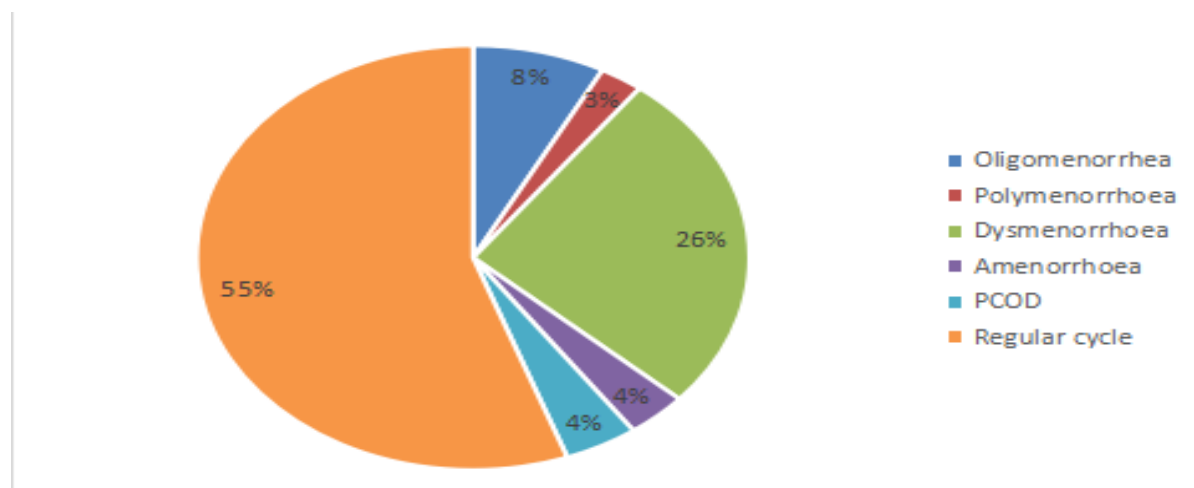
Subjects: Seven Hundred and Eight Seven Mothers were interviewed in a Household Survey.

Result:

- 1) Women's suffering from any menstruation irregularities?

Difficulties in menstruation	Number of females suffered	Percentage of females suffered
Oligomenorrhoea	61	7.75 %
Polymenorrhoea	20	2.54 %
Dysmenorrhoea	207	26.30 %
Amenorrhoea	28	3.56 %
PCOD	34	4.32 %
Regular menstruation	437	55.53 %

Table 1: Results of Menstrual Irregularities

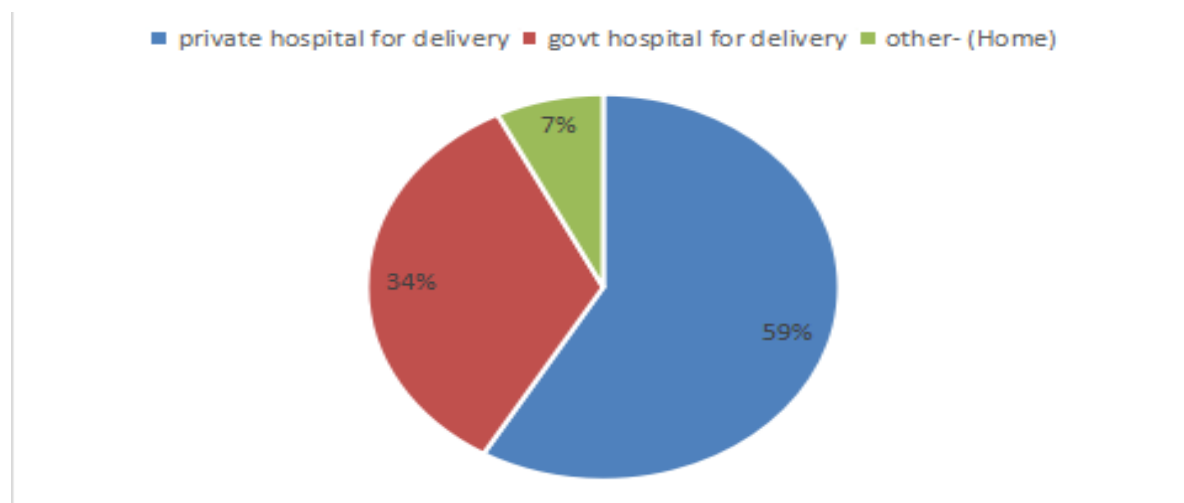


Graph No.-1: Menstrual irregularities graph

2) Hospital type in which delivery had taken place

Place of Delivery	Number of females	Percentage of females
Government hospital	269	34%
Private hospital	460	59%
Other (Home)	58	7%

Table No.2: Place of delivery.



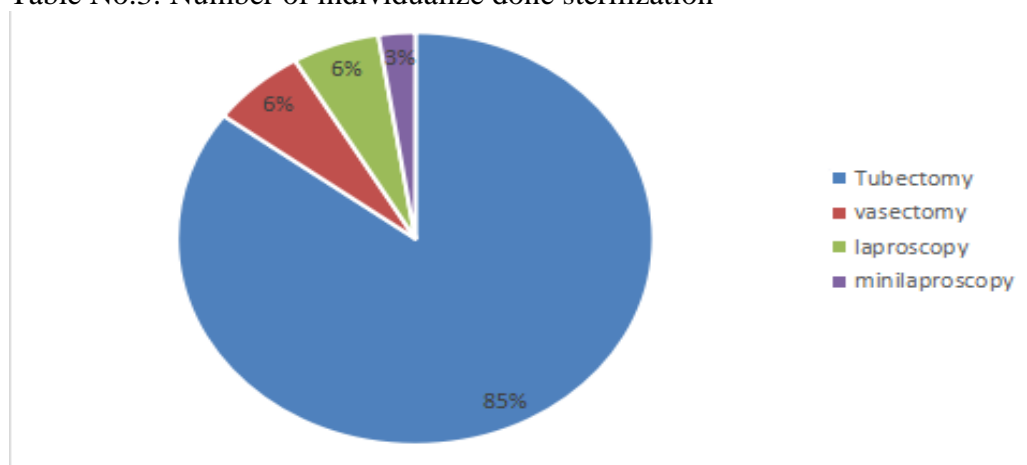
Graph No.2: Place of delivery

3) Number of individualize done sterilization

Method	No. of Individual	% of Individual
Tubectomy	172	85%
Vasectomy	13	6%

LAPROSOPIY	12	6%
Minilaprosopy	5	3%

Table No.3: Number of individualize done sterilization

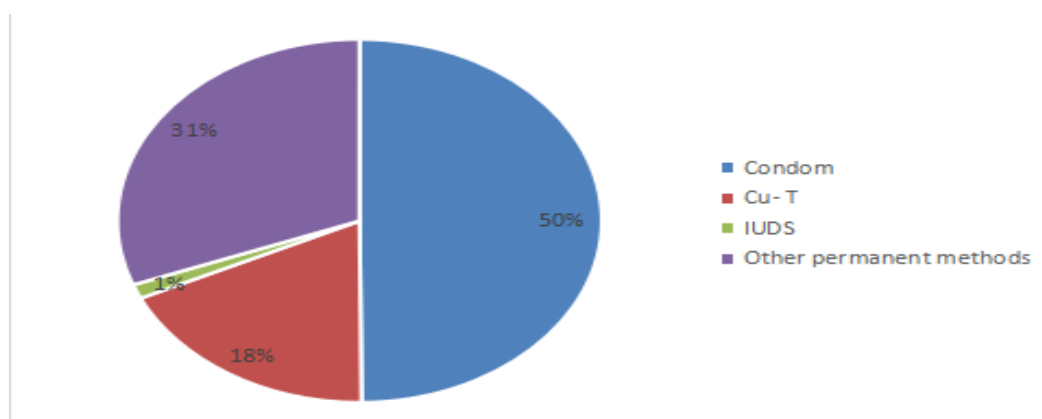


Graph No.3: Number of individualize done sterilization

4) Contraceptive measures used.

Contraceptive Measures	No. of Individual	% of Individual
Condom	391	50%
Cu-T	142	18%
IUDS	10	1%
Other permanent methods	241	31%

Table No 4: Contraceptive measures

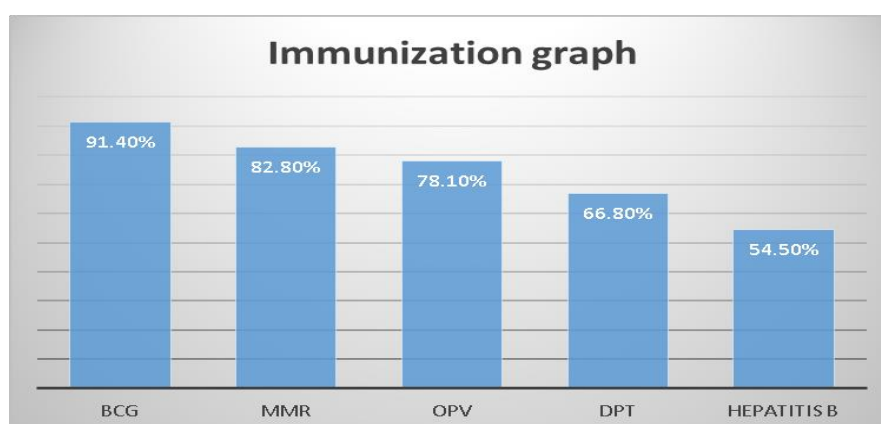


Graph No 4: Contraceptive measures

5) The immunization of children in the localities:

Vaccine	Number of children's	Percentage of children
BCG	719	91.4%
MMR	652	82.8%
OPV	615	78.1%
DPT	526	66.8%
Hepatitis B	429	54.5%

Table No. 5: List of Immunization of children in a community



Graph No.5: Immunization graph.

Results: A total of 787 mothers were interviewed in the household survey. There are irregular menstrual history drawn from the survey, 26.3% ie 207 women's are suffering from Dysmenorrhoea , 7.8% suffering from oligomenorrhoea, 3.6% suffering from Amenorrhoea, 2.5% suffering from Polymenorrhoea, 4.3% women's suffering from PCOD . Out of these, only 58.4% (460 individual) used Private facilities for delivery and 34.2% (269 individual) used Governmental facilities for delivery. Number of individualize done sterilization are tubectomy ie 85% (172 individual), Vasectomy are 6% ie 13 individual, Laproscopy 6% ie 12 individual, Minilaproscopy it is 3% ie 5 individual resulting in more use of tubectomy in the community. The other contraceptive measures are Condoms, the results are 50% individual uses Condom as a contraceptive, 18% uses Copper T, 1% uses IUDS, and 31% individual used other permanent method. The finding for about the immunization of children in the localities are BCG (91.4% ie 719 children), MMR (82.8% ie 652 children), OPV (78.1% ie 615 children), DPT (66.8% ie 526 children), Hepatitis B (54.5% ie 429 children) in the localities of Shivaji Nagar.

Conclusion: After the survey it was observed that in the area of Shivaji nagar Satpur Nashik, the women are suffering from menstrual disorder like dysmenorrhea. From the survey we came to conclusion that the usage of Private Hospitals are more than Governmental reflecting the facilities and the economic status of the localities. The survey also reflected the importance of Contraceptives measure used more frequently ie Male contraceptive measures used more than female.

Reference:

1. Zureick-Brown S, Newby H, Chou D, Mizoguchi N, Say L, Suzuki E, et al. Understanding global trends in maternal mortality. *Int Perspect Sex Reprod Health*. 2013;39(1):32–41. pmid:23584466
2. UN IGME (United Nations Inter-agency Group for Child Mortality Estimation). *Levels & Trends in Child Mortality*. Vol. 147, New York. 2017.
3. WHO. *Trends in Maternal Mortality: 1990 to 2015 Estimates*. Vol. 16, WHO Library Cataloguing-in-Publication Data. 2015.