

Utilization of Kasturba Poshan Sahay Yojana in Urban Health Centers, Valsad- A Study

By

Priyanka Mehta

*Dissertation submitted for the partial fulfillment of the
MBA Hospital and Health Management*

Academic year, 2016-2018



The IIHMR University, Jaipur

1, Prabhu Dayal Marg, Sanganer, Airport
Jaipur 302029, Rajasthan
Ph: 0141 3924700, Fax: 3924738
Website: www.iihmr.edu.in

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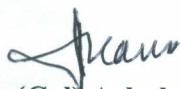
TO WHOMSOEVER MAY CONCERN

This is to certify that **Dr. Priyanka Mehta** student of MBA Hospital Management from The IIHMR University, Jaipur has undergone dissertation at **National Health Mission, Gujarat** from **5th Feb 2018 to 5th May-2018**.

The Candidate has successfully carried out the study designated to her during dissertation training and her approach to the study has been sincere, scientific and analytical.

The Internship is in fulfillment of the course requirements.

I wish her all success in all her future endeavors.



Dr (Col) Ashok Kaushik

Dean, Academics and Student Affairs

The IIHMR University, Jaipur



Dr. Nutan Jain

Professor

The IIHMR University, Jaipur

To whomsoever may concern

The certificate is awarded to

Name -Dr. Priyanka Mehta

In recognition of having successfully completed her

Internship in the department of

Name of Department -Health and Family welfare department

And has successfully completed her Project on

Title of the Project -Situation analysis on Kasturba Poshan Sahay Yojana in Urban Health centers of Valsad

Date 5feb2018- 4 May 2018

Organization -National Health Mission, Gujarat

She comes across as a committed, sincere & diligent person who has a strong drive and zeal for learning

We wish him/her all the best for future endeavors

Abhilek
10/5/18
Chief District Health Officer

Chief District Health Officer
District Panchayat, Valsad.

CERTIFICATE BY SCHOLAR

This is to certify that the dissertation **Utilization of Kasturba Poshan Sahay Yojana in urban health center of Valsad ,Gujarat by Dr.Priyanka Mehta** Enrollment No- **IIHMR-U/01/2016-18/0474** under the supervision of **Dr.Nutan Jain** for award of **MBA in Health and hospital management** of the IIHMR University carried out during the period from **5th FEBRUARY 2018 to 5th MAY 2018** embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, titles in this or any other institute or other similar institution of higher learning.


Signature

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Table of contents

Sr. No	Title	Page No.
1.	Introduction	9
2.	Review of literature	10
3.	Research question	11
4.	Objective	11
5.	Methodology	11-12
6.	Results	13
7.	Participatory factor for KPSY	15
8.	Hindering factor in implementation of KPSY	17
9	Social demographic factor of beneficiaries	24
10	Suggestions	26

List of abbreviations

KPSY-Kasturba Poshan Sahay Yojana

FGD-Focus group discussion

BPL-Below poverty line

JSY-Janani Suraksha Yojana

FHW-Female Health Worker

INTRODUCTION

As giving birth to one is complicated process. Delivery time of every women is critical time as precautions are not taken accurately it can endanger health of women also so a lot of preparation are done by doctors in labor room and also during antenatal period of women i.e. in antenatal period firstly gynecologists encourage pregnant women to come for regular checkup and they also motivate to women to register your pregnancy as early as possible so that a lot of risks or diseases such as cerebral palsy or neuro tubal defect which can be avoided only by intake of iron folic acid in first three months of pregnancy .

Globally, about 800 women die every day of preventable causes related to pregnancy and childbirth; 20 per cent of these women are from India. Annually, it is estimated that 44,000 women die due to preventable pregnancy-related causes in India. Due to this Government of India launched a lot of maternal schemes to save the life of pregnant women i.e. Janani Surksha Yojana, Janani Shishu Suraksha Yojana. Government of India also updating maternal health schemes time to time .as time passed requirements are also changes Janani Suraksha Yojana launched in 2005 to promote institutional delivery in India for poor people. In 2013 Government of India launched Janani Shishu Suraksha Yojana for poor people. In this scheme government provides free institutional delivery, free drugs, free diagnostic test, free food to pregnant women during her hospital stay. In 2017 government of India launched Prime Minister Matri Matritva Vandana Yojana. In this scheme government provides conditional cash transfer to pregnant women. These schemes are launched to reduce maternal death and to promote institutional delivery and complete immunization in new born. From these schemes maternal deaths in India came down to 212 to 167 per 1,00,000 live births.

In Gujarat maternal death rate is 112 per 1,00,000 live births. Despite of these maternal health schemes Gujarat government launched Kasturba Poshan Sahay Yojana and Chireenjivi yojana. These two maternal schemes are greatest efforts from government of Gujarat. In Chireenjivi Yojana, government would enter in to a contract with private provider to cater to institutional services for both normal and complicated delivery including C-section operation and blood transfusion to targeted group.

Kasturba Poshan Sahay Yojana financial assistance is provided to pregnant women who belong to below poverty line. Like other maternal health schemes this scheme are also launched to reduce maternal death and illness due to pregnancy and pregnancy related complications.

The objectives of this scheme are as below:

- To ensure safe motherhood and institutional deliveries (i.e. deliveries should be at the Government Hospitals or at respective well-facilitated Hospitals) to pregnant women from the grassroots level.
- To reduce the morbidity and mortality that is linked to malnutrition and Anaemia in the entire State of Gujarat for BPL mothers.

- Conditional cash transfer is a nutrition intervention which shall ensure the coverage of services, access to nutritious food and micronutrient supplement during the vital period of pregnancy.

Financial assistance which are provided to pregnant women are as follows:

- ✓ In the end of first trimester women who registered herself in Kasturba Poshan Sahay Yojana receives a check of 2000/- rupees as first instalment as subject to early registration of pregnancy in Mamta Divas.
- ✓ After one week of delivery in government institution or Chiranjeevi yojana facility registered pregnant women receives a check of 2000/- rupees
- ✓ Mother of infant for nutrition support after completion of full immunisation schedule in Mamta Divas receives a check of 2000/- rupees.

These maternal health schemes were launched by Government of Gujarat and it is expected that people would utilize these schemes. As if poor people would not utilize these schemes then it is wasteful process, so utilization is most important or how much they are implemented in a district is very important. According to NFHS-4 mothers in Gujarat who received financial assistance through maternal health scheme namely, Janani Suraksha Yojana (JSY) for institutional deliveries was approximately 8.9%. It is alarming and therefore, it is necessary to review the utilization of the KPSY.

Gujarat has a total of 33 districts and one of them is Valsad. Valsad city has a population of approx. 170060 according to Censuses of India 2011. Females constitute 49% of population and an average literacy rate of 80% and female literacy rate is 77%. Despite high literacy rate of women maternal death rate is high in Valsad, that is, 100 per 100000 live births.

According to District Fact Sheet of Valsad 2015-2016 mothers who received financial assistance under Janani Suraksha Yojana (JSY) for births delivered in an institution was 4.4%. This scenario 1% only in the urban areas. There was no such analysis available for KPSY.

REVIEW OF LITERATURE

A study on Predictors of Availing Maternal Health Schemes: A community based study in Gujarat, India by Kranti Vora suggests that socioeconomic variables such as caste, maternal variables such as education and health system variables such as use of government facility are important predictors of maternal health scheme utilization. Results suggest that socioeconomic and health system factors are the best Predictors for availing scheme.

“A Study on Assessment of Kasturba Poshan Sahay Yojana in Junagadh district of Gujarat at District Health Society –Junagadh by Priyanshu Sharma in 2013” reveal that The money given to the beneficiaries was reported to be utilized by either Head of household or mother-in-law in 63 per cent (Early ANC) and was largely utilized for household purposes.

A study to assess awareness among masses on Women oriented health schemes with focus on institutional delivery in Aravalli district of Gujarat”by Dinesh Kapadia in May 2014

National Seminar on Maternal and Child health care: issuesConcerns, and Policy initiative organised by JSS institute of Economic Research. By D Kapadia et.alrevealed that most of pregnantwomen are unaware of maternal health schemes running in Gujarat government.

Studying the effectiveness of mixed models of community based and institutional based interventions for management of severe acute malnourished children by Vijay P Pandya published in international journal of Research in Medical Sciences in 2017 701 children are identified as at the beginning of the intervention while 160 children were SAM at the end of March 2015 .The difference in the proportion of SAM children before and after intervention was statistically significant. An improvement of 80.9% in the status of SAM children was seen among boys while 74.1% was seen among girls.

RESEARCH QUESTION

What is the current utilization rate of Kasturba Poshan Sahay Yojana in Health centres of Valsad.

OBJECTIVES OF THE STUDY

The objectives of study are:

1. To review utilization rate of Kasturba Poshan Sahay in urban health centres HMIS of Valsad
2. To identify the s factors to achieve the rate
3. To identify hindering factors, if any
4. To suggest ways to achieve the cent percent achievement

METHODOLOGY

- **Study Design:** Descriptivecross-sectional descriptive study
- **Source of data:** Quantitative data was collected using HMIS records.
- **Duration of study:**
The study was conducted over a period of3 months (Feb-Apr 2018)
- **Study site –**
There are 7 Urban Health Centers in two Talukas of the district: Valsad and Vapi.
Valsad: Abrama, Sahidchock and Valsad Pardi
Vapi: Dungra, Sulpad ,Geetanagar, Valmikivas

- **Sample size Calculation**

Sample size is calculated basis on the formula given by Fisher et.al.

$$N = z^2 p (1-p)/d^2$$

Where n is sample size

Z is Standard normal deviation for 95% confidence interval. (1.962)

D is precision (0.05)

P is prevalence from previous study (63 percent association is found in a study of KPSY with socio-demographic factor of Junagadh district of Gujarat.

$$= 1.962^2 * 0.63 * (1 - 0.63) / 0.0025$$

$$= 358$$

- **Sampling:** Purposive Sampling (currently pregnant women who have completed their first trimester). Sample were collected during Mamta Session done by FHW
- **Sample Size:** A total of 158 BPL currently pregnant women and 200 women who delivered in the year 2017-18 and having child up to 9 months (came for immunization) were interviewed.
- **Study Respondents:** Currently pregnant women who have completed their first trimester and women who delivered in the year 2017-18 and having child up to 9 months (came for immunization) were interviewed

Female health workers = 30

- **Data collection** quantitative data collection
- **Primary Data Collection**
 - ✓ Data collected from Quantitative method in form of structured questionnaire.
 - ✓ Qualitative data collected from in depth interview with currently pregnant women who have completed their first trimester and women who deliver in last year and female health workers.
- **Secondary Data collection**-from HMIS data and registers of FHW
- **Ethical issues**

Informed consent was taken from study participants. All information was held with confidentiality, the participants name were not included in any forms or any other documents to ensure confidentiality. Permission to carry out the study was obtained from relevant authority.

RESULTS

KBSY utilization from April 2017- March-2018 in Urban Health centers of Valsad

Results of KPSY utilization are as follows however same results are also presented in table no-1 of Annexure.

In 7 U-PHC centers of Valsad BPL population in Abrama, Sahidchock, ValsadPardi, Dungra, Valmikivas, Geetanagar and Sulpad were 2234, 2736, 2225, 1584, 2753, 2268 and 2170 respectively.

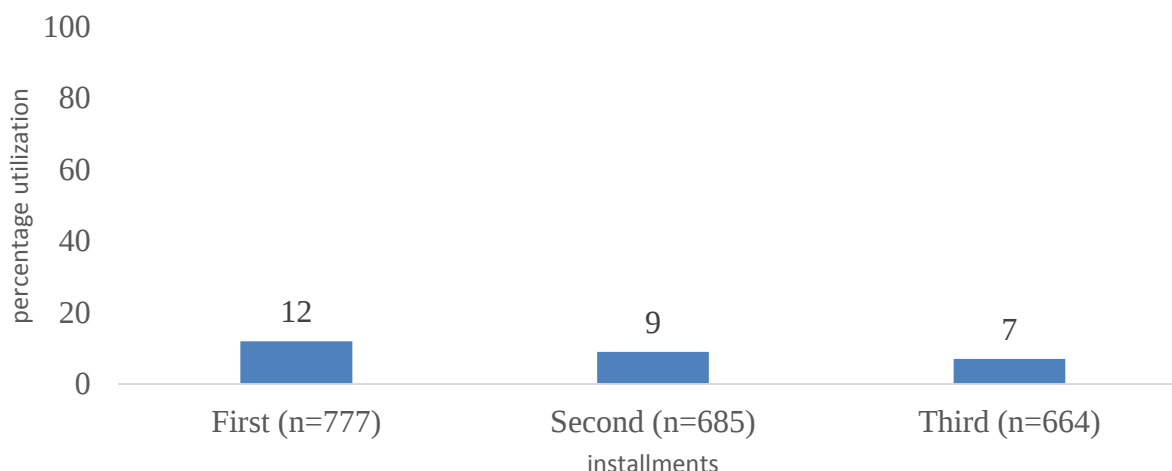
Estimated number of pregnant women in a year is multiple of BPL population and birth rate of urban area of Gujarat. Birth rate of urban area of Gujarat is 18.8 according to vital statistics of Gujarat so estimated number of pregnant women in a year is 29,40,42,51 and 42 of Dungra, Sulpad, Geetanagar, Valmikivas and Abrama respectively.

Actual number of registered pregnancy in year April 2017-March 2018 were 68,95,107,130,111,111,155 in Dungra, Sulpad, Geetanagar, Valmikivas, Abrama, Valsad Pardi and Sahidchock respectively. There were three installments in KPSY scheme. In each installment 2000/- rupees had been given to beneficiaries. So totally 4,92,000/- payment in Dungra, 7,68,000/- payment in Sulpad, 6,42,000/- payment in Geetanagar, 7,80,000 payment in Valmikivas can be estimated.

But for first installment in Dungra only 14 beneficiaries out of 68 applied for KPSY scheme for second installment 10 and for third installment only 8 beneficiaries applied. Totally 64,000 payments occurred in Dungra.

In Sulpad only 11 beneficiaries applied in first installment and for second and third installment 9 and 5 beneficiaries applied for KPSY. Total expected amount which should be spent in three installments is 7,84,000/- but only 1,80,000/- amount was spent.

Fig.1 Percent distribution of respondents by their utilization of financial installment (n=777)



Total females who were eligible for first installment 777 in all U-PHCs but only 12% utilize first installment. Similarly, for second installment 685 women were eligible but 9 % utilize this scheme and in third installment 664 pregnant women eligible for third installment but 7%utilize scheme.

Socio demographic profile of respondents

About 21 percent of women were less than 21 years of age and about 51 percent of women were in 21-30 years of age group. About 60 percent of women follows Hindu religion; followed by 25 percent Islam and 12 percent Christian. In addition, about 34 percent belong to OBC category, 35 percent SC and 33 percent belong to ST category of caste. There was equal distribution of nuclear family and joint family: as half of women live in nuclear family and rest 50 percentage of women lives in joint family. About 40 percent and 39 percent of women live in Kaccha and semi Pucca house respectively. Only 19 percent of women live in Pucca house (Table 2).

Table 2: Per cent distribution of respondents by their socio-demographic indicators

Socio-demographic factor	Number of beneficiaries	Percentage
Age		
less than 21 years	77	20.9
21-30 years	189	51.2
31-40 years	92	24.4
Religion		
Hindu	223	60.4%

Muslims	91	24.7%
Christian	44	11.9%
Category		
OBC	111	33.4
SC	126	34.1
ST	124	32.5
Family		
Nuclear family	180	49.8
Joint family	178	49.2
Type of house		
Kaccha house	146	39.6
Semi pucca house	143	38.8
Pucca house	69	18.4
Gravida		
Primary	95	25.7
2-3 time	157	42.7
More than 3 rd time	106	28.7
ANC registration occurs in		
Aganwadicentre	185	50.1
U-PHC	109	29.5
Sub center	64	17.3

Regarding place of ANC, 50 percent of ANC registration occurred in Aganwadi center and 30 percent in urban health center, and 20 percent in Sub Centre.

Current Pregnant Women and KPSY (n=158)

Of the currently pregnant women (n=158) only 25% (40) registered under KPSY and of these, 25% received the first installment. The reasons for not registering under KPSY were: no bank account, no Aadhar card, and they do not perceive any benefit. The reasons for delayed payment of the first installment the women shared that they get registered late

Table 3: Per cent distribution of respondents (currently pregnant women) by their utilization of KPSY (n=158)

Indicators	%
Currently pregnant women planning to deliver in govt hospital	36.7
Currently pregnant women planning to deliver in private hospital	62
Currently pregnant women who not yet decided where they want to deliver	1.3
Currently pregnant women who applied in KPSY scheme	25.3
Currently pregnant women who got their payment of early registration	25
Currently pregnant women who didn't have Aadhar card	40
Currently pregnant women who didn't have bank account	26

Lactating Women and KPSY (n=200)

Of the lactating women (n=200) whom the interview was conducted on the immunization days 10% were registered for KPSY, of these First installment was received by all of them, second installment was received by 73 percent of them and third installment was received by 63 percent of them.

Table 4: Per cent distribution of respondents (lactating women) by their utilization of KPSY (n=200)

Lactating mothers who registered herself for KPSY (n=200)	10%
Lactating mothers who received first incentive in KPSY	100%
Lactating mothers who received second installment	73%
Lactating mothers who received third installment	63%

Supportive factor for Kasturba Poshan Sahay yojana according to 30 Female Health worker perspective

For participating factor of KPSY in depth interview of female health worker was done. There were 30 female health workers in Valsad. To know about the level of utilization of maternal health programme in depth interview of female health workers was done in 7 UPHC. There were 4-5 Female health workers in each urban health centers. All of them had experience of 2 years and their qualification level were BSC Nursing.

On every Saturday there a meeting held in UPHC for staff. It was mandatory for female health workers to attend this meeting. In this meeting they discuss about their weekly tasks with Medical officer of their U-PHC. In these 3 months we went to each U-PHC to attend Saturday meeting.

Where FHW showed their registers of KPSY in which they had written name of women with their husband's name who had applied for KPSY scheme. They also showed number of women who get installment. According to their registers a lot of women don't get installments on time, so we asked what is cause of this and they told us that sometimes grant was not released in time. Due to this, they had to work harder to motivate poor women for this scheme. They also told us that cash incentives is supporting factor for pregnant women to avail these services.

Hindering factors according to Female Health worker perspective

- Hindering factor for Kasturba Poshan Sahay yojana, firstly in this maternal health scheme ASHA does not get any benefit. Because of that ASHA sometimes does

not promote this maternal health scheme as other health scheme. On other Schemes ASHA get fixed incentive for fixed maternal health scheme. i.e. in Janani Suraksha yojana ASHA get 400 rupees for early registration and institutional delivery

Therefore, creating awareness about Kasturba Poshan Sahay Yojana in 10000 population is big task for female health workers in urban area.

- Secondly for payment in Kasturba Poshan Sahay yojana bank details and Aadhar card of beneficiary is needed. this creates a lot of problem in payment under Kasturba Poshan Sahay yojana as a lot of beneficiaries in Valsad does not get benefit because of Aadhar card problem and bank account problem. According to female health worker if there are 500 beneficiaries in her area then almost half of them have bank account details; or almost $\frac{3}{4}$ th have Aadhar card problem.
- Thirdly in Vapi taluka a lot of migration occurs. So due to migration female health worker does not able to complete their target.
- Fourth, sometimes payment under Kasturba Poshan Sahay yojana doesn't occur in time. Sometimes grants are not released under Kasturba Poshan Sahay yojana. So, this creates a trust problem for female health worker. this is the most demotivating for female health worker.
- A part of these factor for first installment under Kasturba Poshan Sahay Yojana early registration of pregnancy is needed. But there is a perception of people not to disclose their pregnancy in first three month. Because of this a lot of beneficiaries not register their pregnancy in first three months
- And, for second installment in Kasturba Poshan Sahay yojana delivery of beneficiary should be occur in government hospital or in Chirenjeevi yojana. But in Valsad district in urban health centers delivery doesn't occur and there is no chain up for any private gynecologists under Chirenjeevi yojana.

Suggestions for improvement

- Installments need to be given on time to pregnant woman for building trust. Sometimes installment is not given for whole year. This creates a lot of problem to ASHA and Female health worker.

- If bank account details of pregnant women are not present, then the amount should be given in any other form i.e. recharge of register mobile number.
- If Aadhar account of pregnant women are not present, then motivate her to make her Aadhar card as Aadhar card is not essential only for availing maternal health scheme it is useful for other purposes also.
- Create awareness of overall benefits so that the women appreciate that opportunity cost is not so significant as compared to the benefits, then tell the benefits she received.

Annexure

Table no-1 Details of utilization of KPSY from April 2017-March 2018

SN	U-PHC	BPL Population	Estimated number of pregnant women in a year	Actual number of pregnant women registered	Proportion of beneficiaries who could avail the KPSY benefits			Total	
					I	II	III	Estimated	Actual
1.	Dungra	1584	29	68	n=68	n=60	n=50	4,92,000	1,80,000
					U=14	U=10	U=8		
					20.5%	16.6%	16%		
2.	Sulpad	2170	40	95	n=95	n=90	n=85	7,68,000	1,50,000
					U=11	U=9	U=5		
					11.5%	10.0%	5.8%		
3.	Geetanager	2268	42	107	N=107	N=102	N=96	6,42,000	1,79,000
					U=12	U=9	U=8		
					11.2%	8.8%	8.3%		
4.	Valmikivas	2753	51	130	n=130	N=125	N=110	7,80,000	2,22,000
					U=15	U=12	U=10		
					11.5%	9.6%	9%		
5.	Abrama	2234	42	111	N=111	N=102	N=96	6,66,000	1,74,000
					U=16	U=7	U=6		
					20.2%	3.4%	6.2%		
6.	Valsad Pardi	2225	41	111	N=111	N=102	N=96	6,66,000	168000
					U=15	U=8	U=5		
					13.5%	7.8%	5.2%		
7.	Sahidchock	2736	51	155	N=155	N=148	N=142	9,30,000	1,86,000

					U=12	U=10	U=9		
					7.7%	6.7%	6.3%		

- **Planning of delivery in currently pregnant women**

where will you get to your delivery?

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid govt hospital	58	36.7	36.7	36.7
private hospital	98	62.0	62.0	98.7
not yet decided	2	1.3	1.3	100.0
Total	158	100.0	100.0	

Out of 158 pregnant women approx. 37 percent want to deliver their baby in government hospital and approx. 62 percent want to deliver in private hospital.

- **Currently pregnant women applied in maternal health schemes.**

in which scheme you apply or planning to apply

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid none of these	95	60.1	60.1	60.1
JSY	23	14.6	14.6	74.7
Kpsy	40	25.3	25.3	100.0
Total	158	100.0	100.0	

Out of 158 pregnant women 25 percent apply for KPSY scheme and 15 percent apply for JSY scheme and approx. 60 percent of currently pregnant women doesn't want to apply for any scheme

- **Reasons of not apply in maternal health scheme according to beneficiaries' perspective**

if you don't apply for any scheme what is the reason

	Frequency	Percent	Valid Percent	Cumulative Percent
not applicable	63	39.9	39.9	39.9
Aadhar card problem	29	18.4	18.4	58.2
not fully aware of schemes	4	2.5	2.5	60.8
Valid bank account problem	26	16.5	16.5	77.2
payment not occur in any scheme	36	22.8	22.8	100.0
Total	158	100.0	100.0	

Out of 158 women 63 women apply for maternal health scheme so they are not applicable in this. Approx. 18 percent of currently pregnant women who has completely their first trimester don't apply because of Aadhar card problem. Approx. 23 percent of women don't apply due to payment not occur

Lactating women receiving money from government for institutional delivery

did you receive any money from government for institutional delivery?

	Frequency	Percent	Valid Percent	Cumulative Percent
Yes	49	24.5	24.5	24.5
Valid No	151	75.5	75.5	100.0
Total	200	100.0	100.0	

Out of 200 women who deliver in last year only 25 percent received money for institutional delivery while 75 percent of women did not receive any money.

- Under which scheme lactating women get incentives

under which scheme you get the money if you remembered

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid not applicable	151	75.0	75.0	75.0
KPSY	19	10.0	10.0	85.0
JSY	30	15.0	15.0	100.0
Total	200	100.0	100.0	

Only 10 percent of women receive money under KPSY scheme while 15 percent of women receive money under JSY scheme while 75 percent of women not applicable for this.

If Lactating women not get any incentives reasons behind it?

if no what is the reason behind it?

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid not applicable	49	25.0	25.0	25.0
private hospital delivery	5	2.0	2.0	27.0
payment not occur in time	79	39.5	39.5	66.5
Aadhar card	45	22.5	22.5	89.0
bank account problem	22	11.0	11.0	100.0
Total	200	100.0	100.0	

From above table shows that 40 percent of women does not get money because of payment not occur in time while 22 percent of women does not get money due to Aadhar card problem and 11 percent of women doesn't get money due to bank account problem.

Questionnaire

Target group - women who are currently pregnant who has completed her first trimester or women who deliver in last one year

Maternal health schemes Awareness Questionnaire

1. Family Introduction

1.1 Family Number

1.2. Name of Urban slum _____

1.3. Family introduction record

1.3.1 Name of Head of Family _____

1.3.2 Caste _____

1.3.3. Caste category

- ☐ General
- ☐ OBC
- ☐ SC
- ☐ ST
- ☐ OTHER

1.3.4. Total members in family

2. Maternal Care Record

2.1. Record of Currently Pregnant Woman

Sr.No	Details of Pregnant women	
2.1.1	Name of woman	
2.1.2	Age	
2.1.3	Gravida	☐ Prime ☐ 2-3 Gravida ☐ More than the 3rd Gravida
2.1.4	Is pregnancy registered for ANC	☐ Yes ☐ No (if No Skip to 9)
2.1.5	ANC card available	☐ Yes ☐ No

2.1.6	Place of Registration	○ Anganwadi centre ○ Subcentre ○ PHC ○ CHC ○ GOVT HOSPITAL ○ Private hospital ○ U-PHC
2.1.7	Week of Gestation of ANC registration	○ <12 weeks ○ >12-24 weeks ○ 25-36 week
2.1.8	Total number of ANC visit	
2.1.9	Reason for not registration for ANC (LIST the reasons in the blank space)	
2.1.10	Where will you get your delivery?	○ At home ○ Government hospital ○ Private hospital ○ Not yet decided (if at home and not yet decided skip to 11.
2.1.11.	If Home and not yet decided then what the reason behind it?	
2.1.12.	If government or private hospital then who motivated you?	○ Self ○ Family member ○ ASHA ○ ANM/FHW ○ Health staff ○ Others
2.1.13	if you apply for any scheme	○ Yes (skip to 2.1.15) ○ No
2.1.14	if you don't apply for any scheme what is the reason	○ Aadhar card problem ○ Bank account problem ○ Payment not occur in time
2.1.15	in which scheme you apply or planning to apply	○ KPSY ○ JSY ○ JSSK ○ Chireenjivi yojana
2.1.16	if you apply for KPSY then you get payment of early registration?	○ Yes (skip to 3) ○ No

2.1.17	if no then what is the reason	○
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2.2 Record of woman who delivered in last year

Sr.no	Questions	
2.2.1	Name of woman	
2.2.2	Outcome of pregnancy	☐ Abortion ☐ Stillbirth ☐ Live birth

Record of Deliveries /Abortion

2.2.3	Where was delivery /abortion conducted?	☐ Home ☐ Subcentre ☐ PHC/CHC ☐ Govt hospital ☐ Private hospital
2.2.4	Who conducted the delivery/abortion?	☐ Doctor ☐ Nurse ☐ ANM ☐ TBA ☐ Others
2.2.5	Type of delivery?	☐ Normal ☐ Caesarean section
2.2.6	Did you receive any money from government for institutional money?	☐ Yes ☐ No
2.2.7	Under which scheme you get the money if you remembered?	☐ KPSY ☐ JSY

3.list the names of maternal scheme you are aware?

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