

Identifying and addressing structural barriers to Neonatal Mortality Risk and Home Delivery among Tribal Population in Shahdol District, Madhya Pradesh

INTRODUCTION:

In the tribal regions of Shahdol District, Madhya Pradesh, neonatal mortality remains a significant public health concern. Despite efforts to improve healthcare services, access to institutional delivery and essential neonatal care remains limited among the tribal population. Understanding the factors influencing accessibility to healthcare institutions and its impact on neonatal mortality is crucial for effective interventions.

Research Question

1. How does accessibility influence the risk of neonatal deaths and the Home Deliveries among tribal populations in Shahdol district, Madhya Pradesh?
2. How can the definition of hard-to-reach areas be refined to better address maternal and child health needs in Shahdol District, Madhya Pradesh?

Objectives:

1. Identify the barriers to accessibility and neonatal mortality, home delivery among the tribal population of Shahdol district.
2. Study the relationship between accessibility and home delivery among tribal in Shahdol.
3. Define hard to reach area more precisely, incorporating variables from accessibility and maternal and child health variables in view of evidence.

HYPOTHESIS:

Null Hypothesis: There is no significant association between accessibility and the risk of neonatal deaths among tribal populations in the Shahdol district.

Alternative Hypothesis: Improved accessibility correlates with reduced neonatal mortality risk and increased utilization of health institutions for neonatal care among tribal communities in the Shahdol district.

MATERIAL AND METHODS:

Study Design: This study will employ a cross-sectional design utilizing both quantitative and qualitative methods.

Setting: The study will be conducted in selected villages within Shahdol district, Madhya Pradesh.

STUDY POPULATION:

Inclusion criteria: Tribal families with home delivery and neonatal death within the past year from march 2023- march 2024.

Exclusion criteria: Non-tribal families and those residing outside the study area.

STUDY TOOLS: Structured surveys and semi-structured interviews will be utilized for data collection.

DURATION OF STUDY: The study will be conducted over a period of 2 months.

SAMPLE SIZE: A sample size of [Number] tribal families will be included in the study, with [Number] participants per group.

STUDY INSTRUMENTS: Pre-designed questionnaires and semi-structured interviews will be utilized to collect data on socio-demographic characteristics, childbirth practices, and healthcare accessibility.

SAMPLING TECHNIQUE: Multistage sampling will be employed to ensure representation from various tribal communities in the district.

DATA COLLECTION PROCEDURE: Data will be collected through household surveys, interviews with key stakeholders, and a review of health institution records.

OPERATIONAL DEFINITIONS: Definitions of variables such as accessibility, neonatal mortality risk, and healthcare institution delivery will be provided based on the objectives of the study.

DATA ANALYSIS PLAN:

Descriptive statistics will be used to analyze quantitative data, including frequencies and percentages.

Bivariate and multivariate analyses will be conducted to explore the relationship between accessibility, neonatal mortality risk, and healthcare institution delivery.

Relevant statistical software such as SPSS will be utilized for data analysis.

ETHICAL CONSIDERATIONS:

Informed consent will be obtained from all participants, and measures will be implemented to ensure data security, privacy, and confidentiality.

EXPECTED OUTCOMES:

Insights gained from this study will contribute to the development of targeted interventions aimed at improving healthcare accessibility and reducing neonatal mortality among tribal communities in Shahdol District.

CONCLUSION:

This study aims to provide valuable insights into the role of accessibility in shaping neonatal mortality risk and healthcare institution delivery among tribal populations in Shahdol District, Madhya Pradesh. By identifying barriers and facilitators to healthcare access, policymakers and healthcare providers can develop strategies to address the unique needs of these communities and improve maternal and neonatal health outcomes.