

A Study to Assess the Knowledge, Attitude, and Utilization of Selected Government Health Schemes among Mothers of under Five Children in Selected Rural and Urban Areas

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ABSTRACT

The present study was done to compare the knowledge, attitude and utilization of selected Government health schemes among mothers of under five children in selected rural and urban areas. The objectives of the study were to assess the knowledge, attitude and utilization of selected Government health schemes among mothers of under five children in selected rural and urban areas, to compare the knowledge, attitude and utilization of selected Government health schemes among mothers of under five children in selected rural and urban areas and to find out association between knowledge, attitude and utilization of selected Government health schemes among mothers of under five children and selected demographic variables. The sample consisted of 220 mothers of under five children, 110 from urban area and 110 from rural area who were selected by multistage random sampling technique. The tools used for data collection were structured questionnaire, Likert scale and checklist to assess the knowledge, attitude and utilization of selected Government health schemes respectively. The findings of the study depicted that, in urban area 69.1 % of samples had average knowledge whereas in rural area, 60.0% of samples had average knowledge, in urban area 82.7% of samples and in rural area 87.3 % of samples had good attitude towards Government health schemes and in urban area 46.4 % of samples had poor utilization and in rural area 56.4% of samples had average utilization. The present study found that, there was no significant difference between urban and rural area in the level of knowledge ($t=6.378, P=0.875$), there was significant difference between urban and rural area in the attitude level ($t=2.207, P=0.002$) and utilization ($t=4.977, P=0.000$) of selected Government health schemes among mothers of under five children. The study findings showed that there was significant association between knowledge of mothers of under five children and occupation (Fisher's exact significance=0.001), type of family (Fisher's exact significance=0.049) and source of information (Fisher's exact significance=0.011). The study findings revealed that there was significant association between attitude of mothers of under five children and occupation (Fisher's exact significance=0.015) and awareness about health schemes (Fisher's exact significance=0.000). The study findings also revealed that there was significant association between utilization of Government health schemes by mothers of under five children and education (Fisher's exact significance = 0.041), socio-economic status (Fisher's exact significance =0.001), type of family (Fisher's exact significance=0.000), place of delivery (Fisher's exact significance = 0.000) and awareness about health schemes (Fisher's exact significance = 0.000).

KEYWORDS: Knowledge; Attitude; Utilization; Mothers of under five children; Selected Government health schemes; Urban and rural areas

INTRODUCTION

Health is the biggest treasure of life and 'Right to health' is one of the most important basic right of an individual. Our constitution also gives a huge

weightage to health as a fundamental right of an individual. As far as the sphere of health is concerned maternal and child health issues still continue to be

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forefront of national and global health policies. Mother and children not only constitute a large group but they are also a vulnerable or special risk group. Each year approximately eight million women suffer pregnancy related complication and over half a million die. 99% of all maternal death occur in developing countries. In India women of child bearing age constitute 22.2% and children under 15 years of age about 35.3% of the total population together they constitute nearly 57.5% of the total population. Every day on an average 1500 women (536,000) die as a result of complications during pregnancy or childbirth or the six weeks following delivery around the world indicating that every minute a woman dies⁴.

So undoubtedly, it has caught the attention of authorities from all over the world and considered to be an issue that they must solve immediately. In India, there are many schemes launched recently for the betterment of the health of this vulnerable group, concerned particularly with the maternal and child health, the Government of India (GOI) launched various schemes like JSY -Janani Suraksha Yojana, JSSK -Janani Shishu Suraksha Karyakramam, PMMVY -Pradhan Mantri Matru Vandana Yojana, POSHAN ABHIYAN and, MISSION INDRADANUSH. These programmes are implemented with the prime motive of ensuring maternal and child wellness. The beneficiaries under each scheme is provided with either monetary, health care or allied assistance through which the goals of the each scheme is achieved. The beneficiaries are identified and monitored throughout the period of utilization of scheme and ensure each and every one receives the maximum enjoyable benefits. The scheme also stands for supporting the beneficiary's family and thus ensure a holistic care and promote for a better healthier society.

Objectives of the study

- Assess the knowledge, attitude and utilization of selected government health schemes among mothers of under five children in selected rural and urban areas
- Compare the knowledge, attitude and utilization of selected government health schemes among mothers of under five children in selected rural and urban areas
- Find out association between knowledge, attitude and utilization of selected government health schemes among mothers of under five children and selected demographic variables

Materials and methods

The present study was conducted among 220 mothers of under five children in selected rural and urban

areas of selected Panchayat and municipality of Kottayam, Kerala to compare the knowledge, attitude and utilization of selected Government health schemes. Descriptive comparative study design was used. The sampling technique used in this study is multistage random sampling technique. The comparative study was conducted in selected wards of Kottayam district under Panchayat and Municipality administration. Under five mothers from urban area were selected by the following method. The Kottayam District was divided into urban and rural zones according to the administration as the first stage. There are six municipalities in Kottayam district namely Changanassery, Vaikom, Kottayam, Ettumanoor, Pala and Erattupetta. From these, Vaikom municipality was selected randomly by lottery method as the second stage. There are twenty-six wards for the Vaikom municipality. From these wards, five wards were selected randomly as the third stage. The fourth stage includes selection of under-five mothers using systematic random sampling method. A sampling frame of under-five mothers was prepared for the five wards from ante natal registers maintained in the each Anganwadi, the sampling interval width ($k=3$) was established by dividing the size of population ($N=330$) with the required sample size ($n=110$). The first subject was selected randomly from the list, and every k^{th} sample was selected accordingly. The same method was followed for the selection of samples in rural area.

The socio demographic data were analyzed using frequency distribution and percentage. Comparison of knowledge, attitude and utilization among mothers of under five children were analysed by Independent t test and association with knowledge, attitude and utilization with selected demographic variables were done by Fishers exact test. The data were analysed using the licensed SPSS 26 version.

RESULTS

Socio demographic data of mothers of under five children

Majority (76.4%) of samples in urban area and majority (66.4%) of samples in rural area belongs to the age group of 2-5 years. Half of samples (50%) in urban area and majority (62.7%) of samples in rural area belong to the age group of 31-40 years. Majority (95.5%) of samples in urban area and majority (78.2%) of samples in rural area were graduate and above. Less than half (42.7%) of samples in urban area were housewives and half (50%) of samples in rural area were private employees. Majority (89.1%) of samples in urban area and majority (81.8%) samples in rural area belongs to the class APL. More than half (66.4%) of sample in urban area belongs to

nuclear family and more than half 59.1% of samples in rural area belongs to joint family. More than half (63.6%) of samples in urban area and majority (73.6%) of samples in rural area receives information from health personnel. Majority (85.5%) of samples in urban area and majority (73.6) of samples in rural area were selected private hospital for delivery. More than half (60%) of samples in urban area and majority (70.9%) of samples in rural area had normal delivery. Majority (73.6%) of samples in urban area and majority (83.6%) of samples in rural area had awareness about the health schemes

Table:1 Frequency distribution and percentage of knowledge ,attitude and utilization of selected Govt health schemes among mothers of under five children

(n=220)

	Urban area (n=110)	Rural area (n=110)
Knowledge	Average(69.1%)	Average(60.0%)
Attitude	Good(82.7%)	Good(87.3%)
utilization	Poor(46.4%)	Average(56.4%)

Table 1 depicts that in urban area 69.1% and in rural area 60.0% of samples had average knowledge, 82.7% and 87.3% of samples had good attitude in urban and rural area respectively, and 46.4% of samples in urban area had poor utilization and 56.4% of samples in rural area had average utilization.

Table 2: Mean, standard deviation and 't' value of knowledge score ,attitude score and utilization score of Government health schemes among mothers of under five children in urban and rural area

	Urban area & rural area df t P		
Knowledge	218	6.378	0.875
Attitude	218	2.207	0.002*
utilization	218	4.977	0.000**

Table 2 shows that there is no significant difference ($t=6.378$, $P=0.875$) between the level of knowledge among mothers of under five children in rural and urban areas, there is significant difference($t=2.207$, $P=0.002$) between the attitude among mothers of under five children in rural and urban areas and there is significant difference($t=4.977$, $P=0.000$) between the utilization among mothers of under five children in rural and urban areas.

Association between knowledge, attitude and utilization of selected Government health schemes among mothers of under five children and selected demographic variable

The present study results showed that there was significant association between level of knowledge of mothers of under five children and selected socio demographic variables like with occupation, type of family, source of information and awareness about the health schemes. (Fisher's exact significance <0.05), there was significant association between attitude of mothers of under five children and selected socio demographic variables like occupation and awareness about the health schemes. (Fisher's exact significance <0.05) and there was significant association between utilization of selected Govt health schemes and selected socio demographic variables like education, socio-economic status, type of family, place of delivery and awareness about health schemes. (Fisher's exact significance <0.05).

CONCLUSION

In the present study revealed that level of knowledge among mothers of under five children in urban and rural areas belongs to average category, level of attitude among mothers of under five children in urban and rural areas belongs to good category and level of utilization among mothers of under five children in urban area belongs to poor category whereas in rural area belongs to average category. The study concluded that the knowledge level and utilization level was poorer among mothers of under five children urban area. Hence policies and programme related to under five mothers should be launched in urban areas. Provision of more awareness programmes will further improve their knowledge and utilization.

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