

# A REVIEW OF FACTORS INFLUENCING THE UTILIZATION OF ANTENATAL CARE SERVICES

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**Abstract:** Antenatal is period of nine month of pregnancy in which the fetus grow and make a once new life inside the mother's womb, where Antenatal care services is one of the very important services provided by the health care professionals or midwives or nurses to pregnant women for their safe pregnancy and delivery. It comprises of careful history taking and general and obstetrical examinations and advices given to the pregnant women. Various studies have found that Inappropriate Usage of health care services in India is an important issue, and about 1/3<sup>rd</sup> of global maternity death is found in India. There are various factors which influence utilization of antenatal care services in India. Present study have conducted extensive review and identified various factors which influence utilization of antenatal care services. Factors such as Maternal Age, Education, Distance of health facilities, Women's Parity, socioeconomic conditions, Type of Family and Supportive partner/Spouse, Women's knowledge regarding pregnancy and quality care, Traditional belief, Non Acceptability and Inaccessibility Of Hospital Services, Women's Lifestyle. The findings of this review would help concerned authorities like government and N.G.Os to develop effective strategies for utilization of antenatal care services.

Keywords: Antenatal care services, Factors affecting, Utilization, Pregnancy.

## I. INTRODUCTION:

Antenatal care is key factor which influence the complete growth and development of once unborn life as well as the mother. It is important strategy to reduce maternal and neonatal morbidity and mortality rate because adequate usage of antenatal health care services is associated with healthy maternal and neonatal outcomes (Onasoga et. al 2012). In the developing countries women do not receive adequate antenatal care during pregnancy and maternal related health problems are even more prevalent due to the Parity Status of Mothers, Non Acceptability and Inaccessibility of Hospital Services, Inappropriate Advices from Health Workers, Lack of Awareness about ANC Services and Toll-Free Helpline Numbers, traditional beliefs, husband's education and occupation, poor socioeconomic conditions etc..Early initiation and periodically antenatal care visit is essential for health of mother and baby. World Health Organization (WHO) has recommended minimum of four antenatal care (ANC) visits, ideally at 16<sup>th</sup> , 24<sup>th</sup> –28<sup>th</sup> , 32, and 36 weeks for women with normal pregnancies(Deo, K. K et.al 2015). previous studies found that the utilization of recommended ANC services often depends upon the availability, accessability and affordability, quality of services; social, cultural beliefs as well as individual's and household's characteristics of the end users (Ali, N et.al 2018).In the first antenatal visit is expected to screen and treat the anaemia, syphilis, screen for risk factors in this visit mother is issued an antenatal card this card is record of complete pregnancy and filled in every visit whenever she visit, After 1<sup>st</sup> visit women is booked for subsequent antenatal care visit and identify the high risk cases and complications like preterm, still birth (Abose, Z. et.al 2010). A full complete medical and family history is taken from pregnant women regarding current pregnancy, previous pregnancy, previous history of complicated pregnancy, History of any psychiatric problems, previous operations, genetic disorders, allergies, uses of medications and drugs, uses of alcohol, tobacco and other substances etc (Nisar, N., & White, F. 2003). ANC even offers an important opportunity for healthcare providers also to detect, treat, and prevent pregnancy-related problems and deal with many life-threatening conditions. Further, ANC visit helps in timely referral to the appropriate health facilities; ensures delivery of a full term healthy baby, birth preparedness, Promote maintenance of physical, mental and social well being of mother and baby. Early detection of high risk cases and minimize risks by taking appropriate treatment on time, provides doses of tetanus toxoid (TT) immunization, iron and folic acid tablets, de-worming tablets, Advice the mother

about breast feeding, post natal care etc. There is an excellent infrastructure and setup for the delivery of maternal and child related health services through a network of sub centres and primary health centres in rural areas of India. But still, mother and their families are not aware about institutional deliveries and its advantages, most child deliveries are conducted at home by TBA (traditional birth attendants) and relatives. The safe Motherhood and healthy child is now become a component of RCH (Reproductive and Child Health Programme), is initiated with purpose to achieve an actual improvement in the health status of mother and children in India. It includes early registration of pregnancy, Minimum three antenatal check-ups, early detection of high risk cases and referral, coverage with tetanus toxoid and iron and folic acid tablets, Institutional deliveries by trained health personnel, facilities provided to manage obstetrical emergencies and birth spacing (Varma, G. R et.al 2011).

A Numbers of studies found that urban-rural inequality in utilizing antenatal care services in different developing countries. The people of urban areas found grater coverage of antenatal care services as compare to rural due to poor accessibility of health services, usage of antenatal care services is also influenced by socio-demographic characteristics, services fee, distance and insufficient health service providers at health centres negatively affect the usage of antenatal care services. (Getasew, M 2015).

## **FACTORS ASSOCIATED WITH UTILIZATION OF ANTENATAL CARE SERVICES**

### **1. MATERNAL AGE :**

Previous studies shown that mothers' age have been proven to be significant factor which negatively or positively affect the usage of Antenatal Care. In some studies, young age of women has been identified as predisposing determinants; Women who were 25 years or more were more likely to attend ANC clinic more than women who were less than 25 years (Abosse, Z. et.al 2010). Few studies suggest that increased age is associated with more utilization of ANC services (Ali, S. A 2018), For example, study from Central Ethiopia found that the odds of attending ANC are 1.2 times higher for women in the age group of 20-34 as compared to those in the age group 15-19 women (Birmeta K 2013). Older or advance age of women are more likely to use maternal health care services than younger women, with effects being observed at particular levels of education and birth order of children (Nisar, N., & White, F. 2003). Recent studies shown that from higher age groups or from households with large number of members and women who were family heads were have more chances of poor utilization of ANC services. Being married to a husband aged 41 years or more older age, being alone or single, divorced or widowed and poor social and family support were associated with low utilization of ANC services (Roy, S et.al 2017). The risk of poor utilization of ANC services was almost twice as high in the older age group as compared to women aged 30 years or it's less (Rurangirwa, A. et. al 2017).

### **2. WOMEN'S AND FAMILY EDUCATION:**

Educated women and family have greater awareness regarding the health facilities provided during antenatal period and their usage and advantages. It is argued that educated women were more aware of health problems and know more about the availability of health care services, and utilize the information more effectively than non-educated women (Ali, S et.al 2018). Mother's education has a positive impact on utilization of ANC (Onasoga, O. A et.al 2012). Education may help to expose women to more health education messages and campaigns, enabling them to recognize danger signs and complications and take appropriate action (Yang S et.al 2012). These women might have greater opportunities to receive health information and pay more attention to maternal healthcare (Yang S et.al 2012). The study also revealed that educational status of mothers, age and type of family played a significant role in underutilization of ANC services among the women from lower castes (Awasthi, M et.al 2018).

### **3. DISTANCE TO HEALTH CARE FACILITIES:**

Majority of studies revealed that there is strong association between distance and attendance of ANC clinic. The main reason found behind that is pregnant women find more stress to walk long distance and take 2 or more buses in an effort to get ANC visit on appointment days (Onasoga et. al 2012). Transportation/access issues included long distance to health facilities, whether, women alone cannot be allowed from home, poor roads, and lack of transportation facilities. (Wilunda, C et.al 2017). Hence there is need for better equipped ANC centres to be located within nearby distance in community to improve better utilization (Onasoga

et. al 2012). Generally, the distance has been identified as an important barrier to the use of services, especially in rural areas (Ali NR et.al 1999). Studies have revealed that normally general health care utilization for every kind of service is also affected by distance (Ali, S. A. et.al 2018). The effect of distance on the use of services increases when it is combined with lack of transportation particularly in developing countries (Ali NR et.al 1999). Moreover, access to the facilities also has an effect on the frequencies of services being used (Ali NR et.al 1999). Studies from Pakistan have found that acceptance to reproductive care depends upon the transportation system and physical distance between the villages and the service centres (Midhet F, et.al 1998).

#### **4. WOMEN'S PARITY:**

Various studies suggested that there is a strong relationship between women's parity and utilization of the ANC, with multiparous women making significantly fewer visits to ANC than nulliparous women. This could be because nulliparous women identify themselves as being at high danger of developing pregnancy related complications(13,20).some studies reported that there is no significant association between parity and their attendance/utilization of ANC services. This means that parity is not a determining factor in the utilization of ANC services which is in contrast with the findings. (Onasoga et. al 2012).

#### **5. SOCIO ECONOMIC STATUS:**

Some studies showed the significant association between cost and usage of antenatal care services. The cost of health care services, prescription of necessary drugs and transportation determine the affordability of health care (Ali, H. S et.al 2016). Studies in Ghana, Swaziland, Zaire, and Uganda showed a decline in use of health services as a result of higher user fees. However, pregnant women's are expected to pay costs for consultation, laboratory investigations and treatment (Ali, H. S et.al 2016). Most of the studies have shown a positive association between socioeconomic status and the utilization of ANC (Roy, S et.al 2017). A study from Ethiopia identified that when women with higher incomes tend to start ANC early and the likelihood of utilizing ANC decreased, as the family income gets lower (Birmeta K et.al 2013).

#### **6. TYPE OF FAMILY AND SUPPORTIVE PARTNER/SPOUSE**

The findings also reveal that Husband's acceptance and concern for the services rendered as the major factors affecting the utilization of ANC services (Onasoga et. al 2012). It is found that almost half of the Indian women are housewives and husbands are only the main decision makers in the family as guided by the father in laws, Where women's has no right to take their own decision, only a few number of women took their own decisions on health related issues. Women have very poor preference in their family, In fact they have no choices rather than believing husband and other family members of In laws for any decision. It is also very important for the women to make their own choices own decisions regarding their personal, family, or social needs.(Awasthi, M. S. et. al 2018). In few studies, the researchers concluded that women who had no support from their husbands or life partners utilized ANC services almost three weeks later than those who were given support. Similarly, the utilization of ANC services was almost nine times found more likely for women reported their husbands to approve ANC than women with those whose husbands did not approve ANC service (Roy, S et.al 2017).

#### **7. WOMEN'S KNOWLEDGE REGARDING PREGNANCY AND QUALITY CARE:**

Some studies concluded that women's knowledge about the health facilities and care is found an important factor. It enables women to be aware about all the updated status of health care facilities and their utilization (Roy, S et.al 2017).The odds of utilization of ANC were higher than three times for those with having good knowledge regarding pregnancy its care and major danger signs of pregnancy than those with have poor knowledge (Birmeta K et.al 2013). The studies have revealed that women's must have sufficient knowledge regarding the advantages of ANC services utilization and disadvantages of poor ANC services utilization and there are various complications associated with pregnancy also plays an important role in the utilization of ANC services. Women were reported to initiate ANC late owing to the perceived bad quality of service at the healthcare facility (Gross K et.al 2012). Women's knowledge of incentives, importance of institutional delivery, proper diet and supplements, toll free numbers, vaccinations and other health services shows a strong association with women's utilization of ANC service. Studies

found that women having good knowledge about all maternal health services were more than five times more likely to use ANC services compared to those who had poor knowledge (Dairo, M. D., & Owoyokun, K. E. 2010).

## 8. SOCIO-CULTURAL INFLUENCE

Previous studies concluded that the stereotype thinking of the society have the great influence to attend antenatal care services, this type of thinking bounds women to stay at home and perform the home maker's job such as taking care of children, taking care of the house, and preparing food for the family etc and in the rural counterpart of the country women are required to work on their farms as well. This may lead them to avoid attending ANC programs. This problem increases with Long distance of ANC centre and lack of helping hand to take care home and family members (Wilunda, C et.al 2017).

## 9. TRADITIONAL BELIEF

Various studies focus that in developing countries women and their family are still believing on TBA (Traditional Birth Attendant) especially in the rural areas. There are various reason behind preference of TBA such as no expenses, traditional beliefs, feel very comfortable with a TBA services because they already aware with person, Pregnant women and their family did not have confidence in village trained midwives and health workers as because of they are mostly young, inexperienced and unmarried and also they feared to have more expenses and could not able to afford, and transportation facility is not available in rural areas in emergency (Wilunda, C et.al 2017).

## 10. NON ACCEPTABILITY AND INACCESSIBILITY OF HOSPITAL SERVICES

Non acceptability of hospital services was found the one of the important reason for inadequate utilization of ANC services followed by non availability of hospital at rural areas. Poor and unsatisfactory health care services and inappropriate advice influence the women and their family for utilization of maternal services. from health worker. In some places this issue make health workers active and enforces for quality care and access to door to door service and give timely health education to the pregnant women and their family for increasing the usage of ANC services (Dairo, M. D., & Owoyokun, K. E. 2010).

## 12. OTHER FACTORS:

Some studies also focused on other factors which directly or indirectly influence the utilization of ANC services. Previous complicated obstetrical history, Religion, Woman's lifestyle, fear of going hospital etc.

## CONCLUSION:

Present study was conducted to identify the factors influencing the utilization of antenatal care services and found various demographic, reproductive and other factors such as Maternal Age, Education, Distance of health facilities, Women's Parity, socioeconomic conditions, Type of Family and Supportive partner/Spouse, Women's knowledge regarding pregnancy and quality care, Traditional belief, Non Acceptability and Inaccessibility of Hospital Services which influence the proper utilization of antenatal care services.

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