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Cultural Factors Associated with Utilization of Antenatal Care Services in Rural India

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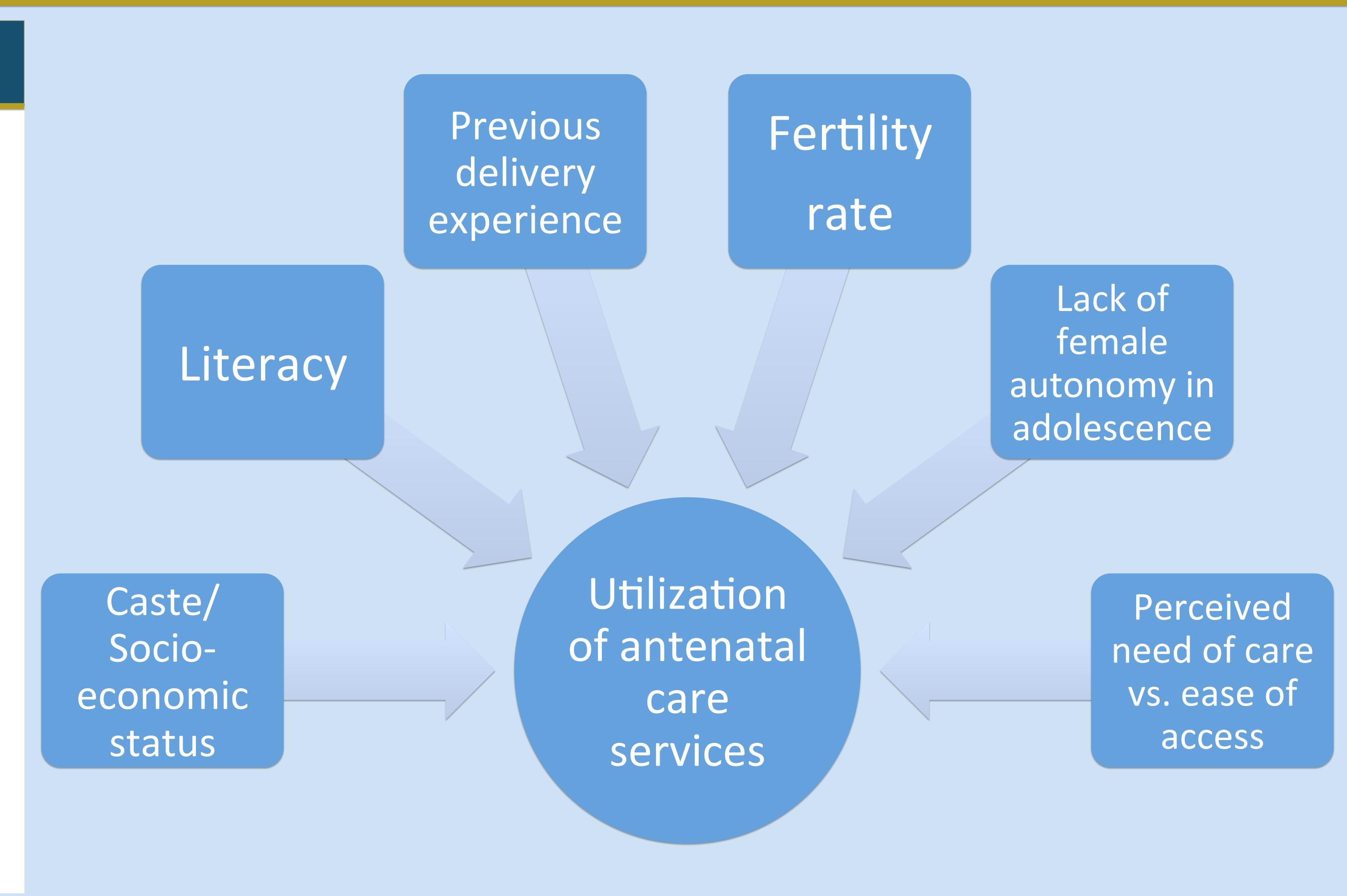
Cultural Factors Associated with Utilization of Antenatal Care Services in Rural India

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Anjali Om Mentor: Professor Mary Boyes, Honors College

Introduction

Despite vast economic development in India, high incidences of neonatal tetanus have plagued rural areas as a result of cultural practices that encourage topical applications of cow dung to cut umbilical stumps either directly or by using ghee heated with cow dung to warm umbilical dressings. In recent years, the World Health Organization has made great efforts to increase availability of tetanus vaccines in affected areas. However, this system is not wholly effective because it does not consider certain predisposing characteristics or enabling variations that contribute to mothers' lack of utilization of available health resources. In order to effectively reduce infant and neonatal mortality rates in India, cultural aspects that contribute to mothers' utilization of antenatal care services should be identified so that intervention efforts may be targeted appropriately.



Results/Discussion

Demographic characteristics that make mothers less likely to use antenatal care services include: low socioeconomic status/caste, low education/literacy levels, previously positive delivery experiences, high (5+ children) fertility rates, and rural geographic location. Often, women who get married as adolescents lose the autonomy that comes with higher education and thus are unable to make independent decisions concerning their health care. All of these factors contribute to perceived need of care; ultimately, weighing perceived need with ease of access determines whether or not mothers will seek health care. Many of the demographic characteristics associated with low utilization of health care services are also factors used to identify mothers at risk for poor neonatal umbilical cord care. Thus, by analyzing the sociological factors at play, intervention efforts may be targeted more appropriately for effective reduction of neonatal mortality rates.

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