Crying Mothers and their Tale of Woes: Maternal Complications in the Northeastern States of India

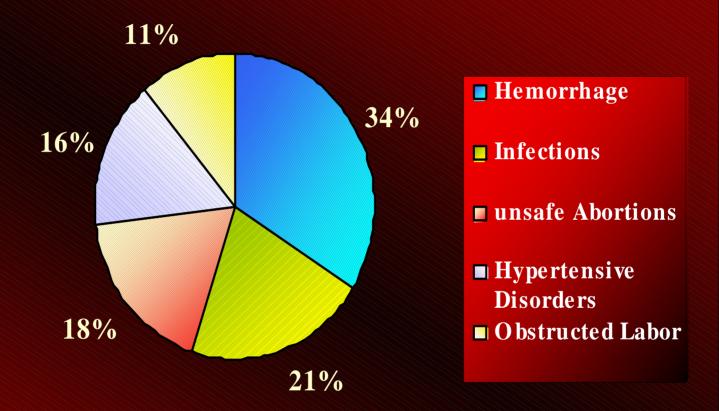


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Direct Causes of Maternal Deaths



Indirect Causes are Malaria, Anemia, Tuberculosis, Hepatitis and Diabitis

Objectives

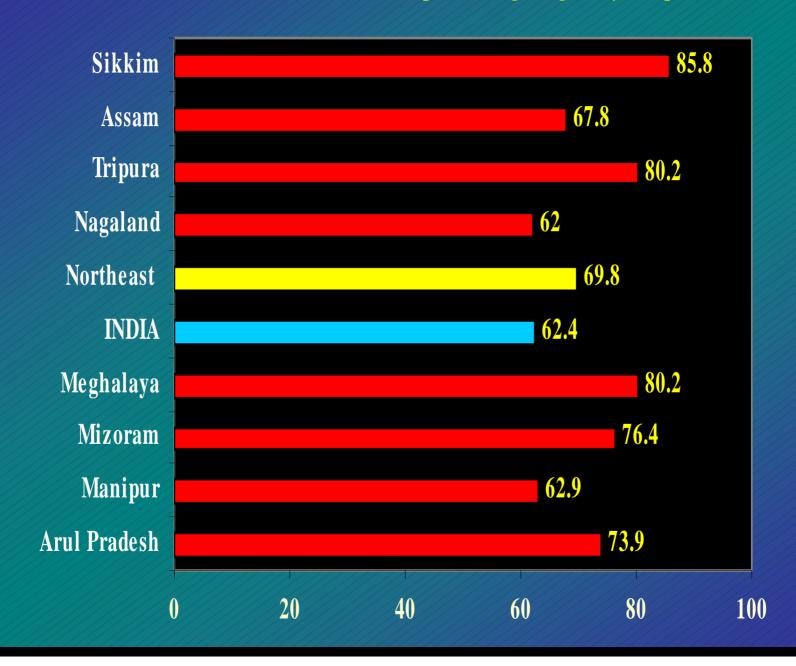
- To study the extent of maternal care utilization and maternal morbidity in the Northeastern states of India.
- To study the differentials in the extent of utilization of maternal care services by demographic and socio-economic characteristics.
- To study the differentials in the extent of maternal complications by demographic, socio-economic and health characteristics.
- To examine the association between maternal morbidity and utilization of maternal care services.

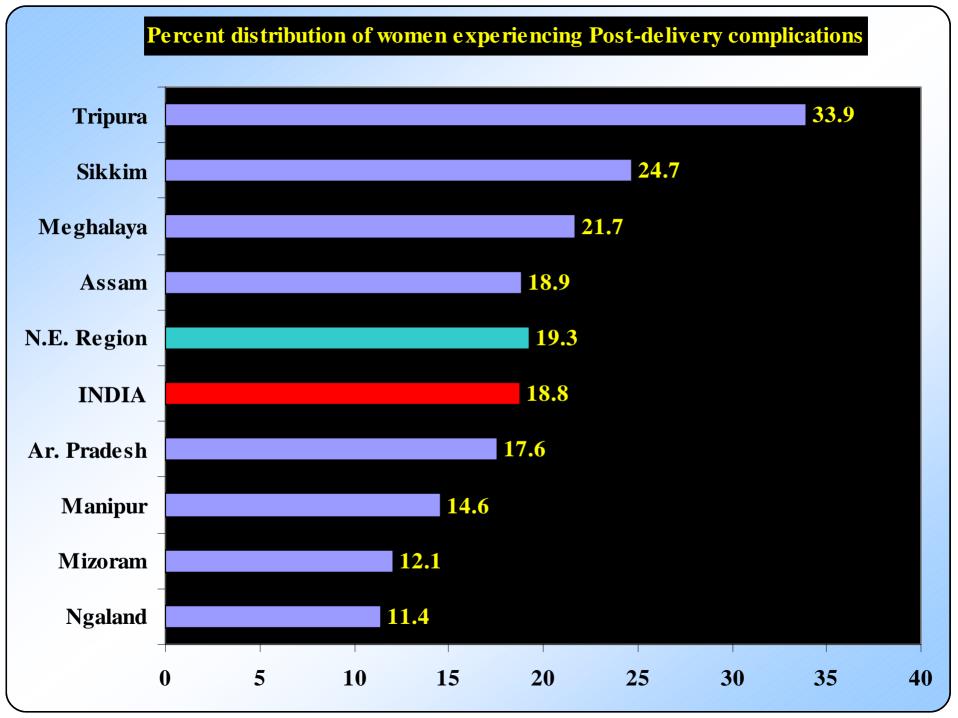
Data Source: National Family Health Survey (NFHS-2, 1998-99), Northeastern States, Assam and Sikkim.

Percent distribution of women experiencing any complications



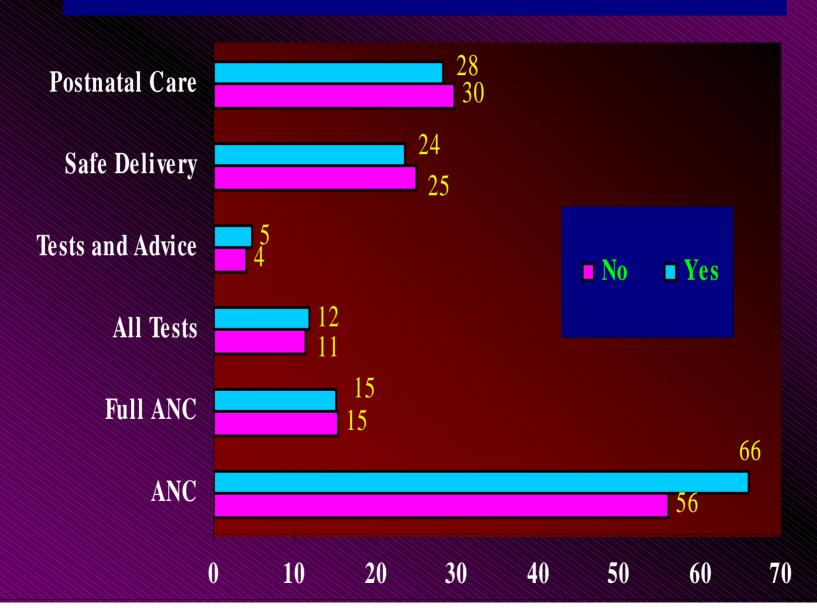
Percent distribution of women experiencing Pregnnacy complications

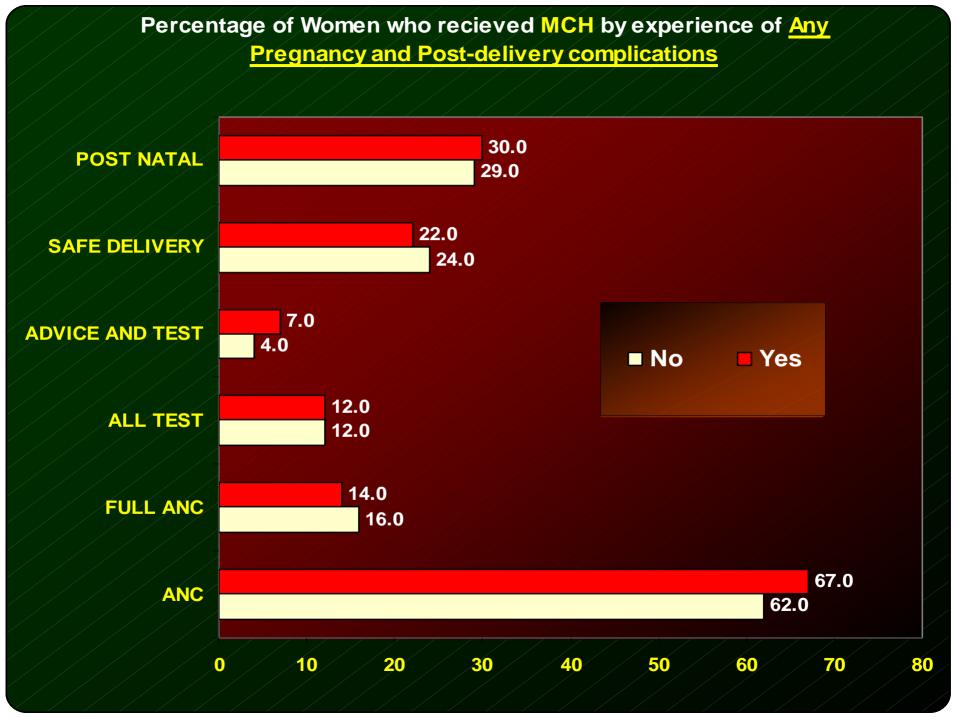




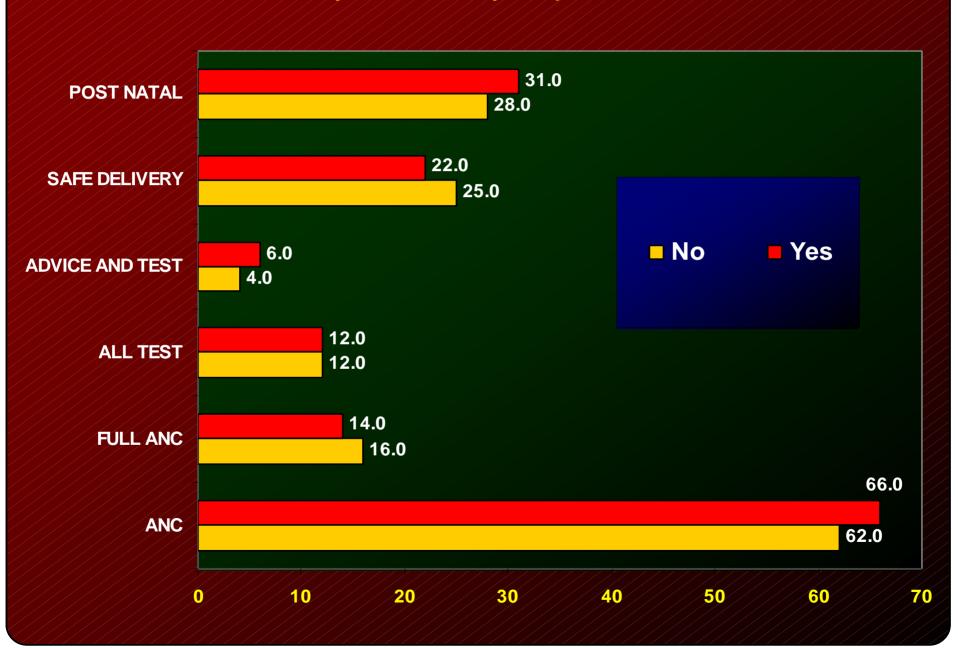
Any Pregnancy Complication	Post Delivery Complications		
	No	Yes	Total
No	486	12.5 (70)	556
Yes	428	26.0 (150)	578
Total		220	1134

Percentage of women who received MCH by experience of Any Pregnancy complications





Percentage of Women who recieved MCH by experience of Any Post-delivery complications



Summary

- Low utilization of maternal health care services, full ANC and postnatal care is achieved by only 15 percent of women and safe delivery by only 24 percent of women. Majority of such women belong to:-
 - Low Standard of Living,
 - Illiterate Women
 - working women with rural background
- Women with delivery and post-delivery complications generally belong to-
 - **▶**Women with higher Birth order
 - Working women
- pregnancy and post-delivery complications such as convulsions, swelling, excessive fatigue, vaginal bleeding and post-delivery vaginal bleeding is higher than the national average.

Policy Implications

Maternal and child health programs in North Eastern States can be inhanced by:

- -encouraging women for full ANC
- -to give birth with assistance from trained health personnel and in a health facility.
- -Effective implementation of family welfare programme
- -increasing access to essential obstetric care and encouraging better nutrition
- -increased education and expanding access to all types of health care services for women
- -by educating women about the danger signs of pregnancy