

Janani Suraksha Yojana: An Evaluation of Its Effectiveness in the Selected Districts of Uttar Pradesh.**Deeba Abrar***Research Scholar**Department of Women's Studies
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E-mail: deebamu@gamil.com***ABSTRACT**

The purpose of this paper is to analyze the effectiveness of Janani Suraksha Yojana in the selected districts of Uttar Pradesh. The Government of India launched in 2005 Janani Suraksha Yojana it aim at increasing institutional delivery so reducing the numbers of maternal and neonatal deaths. Janani Suraksha Yojana, a conditional cash transfer scheme, to incentivize women to give birth in a health facility. The scheme replaces the national maternity benefit scheme. To examine the level of awareness among women about the scheme and To assess the effectiveness and utilization of Janani Suraksha Yojana among the women in the selected districts of Uttar Pradesh. A field cross sectional study was conducted in Aligarh, Sambhal, and Moradabad among 210 beneficiaries. The respondents were interviewed using in-depth interviewed schedule questionnaire. The present study found that 96 out of 210 (45.7%) respondents were aware about the scheme. There was no association between education and awareness about JSY. Increasing awareness about the Janani Suraksha Yojana through information, education and communication (IEC) activities.

Key word: *Janani Suraksha Yojana, JSY, Awareness, Utilization*

Introduction

Health is essential to the country development .it is very broadly recognized that health is an essential part of human development .Nothing could be of great important that the health of community in terms of resource for socio –economic development .In horrific emotion of this awareness the people living in nation have little or no access to modern medical and health care services This result in high rate of morbidity and mortality from disease (Park, 2017). The Public Health System came into existence due to the Bhore Committee and later it was strengthened from the Alma Ata declaration in 1978. One of the critical issues in Indian health scenario has

been maternal and child health. Pregnant women die in India due to a combination of important factors like, poverty, ineffective or unaffordable health services, lack of political, managerial and administrative will. All this culminates in a high proportion of home deliveries by unskilled relatives and delays in seeking care and this in turn adds to the maternal mortality ratios (Khan et al. 2010).

Mother and child health issue still continue to be national and global health issue .Global maternal death ratio fell by 44 per cent between 1990 and 2015. The total number of maternal deaths around the world dropped from about 532,000 in 1990 to an estimated 303,000 in 2015. This equates to an estimated global maternal death ratio of 216 maternal deaths per 100,000 live births, down from 385 in 1990 (UNICEF, 2014). In India, governmental services for providing delivery care have gone through an extensive change after the implementation of the National Rural Health Mission program started in 2005. National rural health mission (NRHM) an initiative by the government of India has launched various initiatives for promotion of maternal health. One such initiative is the Janani Suraksha Yojana (JSY) is a safe motherhood intervention under the National Rural Health Mission (NRHM) being implemented with the objective of reducing maternal and neo-natal mortality by promoting institutional delivery among the poor pregnant women. The Yojana was launched on 12th April 2005.

Rationale of the study: This study focuses on implementation of a national maternal health care policy, which is based on the government's financing of institutional delivery care for poor, rural women

Review of Literature

Hanmanta et al. (2011) explored why Janani SurakshaYojna's benefits were missed among the beneficiaries of the Solapur slums in western Maharashtra. Of the 3212 women, 360 (11.20%) were eligible to receive the benefit of JSY. Of the 360, only 118 (32.78%) women benefited from JSY. 242 (67.22%) lost the opportunity due to lack of knowledge of JSY and IEC efforts to implement JSY, revealing the majority of poor women eligible for enforcement rights. Chaturvedi et al. (2011) conducted a cross-sectional study in Ahmadnagar district, Maharashtra. The study identifies obstacles preventing women from accessing the benefits and difficulties faced by administrators in implementing the program. Singh et al. (2014) found that the

awareness and knowledge of their study group was lower than that of other studies; efforts to increase awareness and knowledge of JSY need to be intensified. Nanjuda (2015) found that 68 percent of the respondents were aware about JSY services and majority of the respondents got information from ASHA and Anganwadi works and through mass Medias. Priya et al. (2016) conducted a cross-sectional study under Rural Health Training Centre and Urban Health Training Centre of the field practice area of Department of Community Medicine, J N Medical College Hospital, and Aligarh.. It was found that institutional delivery was influenced by women's age, religion, caste, and educational status. The level of education and younger age was found to have a positive effect on utilization of JSY. Singh et al. (2017) Study in Uttar Pradesh Home deliveries still occur in Uttar Pradesh proper campaigning, removing their fears regarding hospital settings and staff, making alternative arrangement for transport and making due payments on time.

After going through the review of literature the researcher found that many empirical studies on Janani Suraksha Yojana practices took place around the India. In Uttar Pradesh very few researchers have been found on JSY. There is no such study took place that have examined the impact of JSY in particular selected districts of Uttar Pradesh.

Objective

- To examine the level of awareness among women about the scheme.
- To assess the effectiveness and utilization of Janani Suraksha Yojana among the women in the selected districts of Uttar Pradesh.

Hypotheses

H₀1: There is no association between the socio demography and awareness about the Janani Suraksha Yojana.

Methods of the study

Primary Data: Primary data is collected by using semi -structured schedules, in-depth interviews, survey Questionnaire.

Secondary data: is collect from the available reports, book, government document internet, news papers and various journal and the records, at the district, block.

Research Design: A field based cross-sectional study

Areas of Study

Selected Districts: Aligarh, Sambhal, Moradabad

Selected block:	Jawan, Sambhal (Village), Bilari
Selected village:	Ponjoopur, Rukundarisari, Akbarpura
Study subject:	Pregnant women's, mothers, beneficiaries
Sampling methods:	Multi-stage sampling
Sample size:	210 respondents

Data Analysis

The data analysis from different source was computed, classified, analyzed and interpreted. The data collected from field was by careful inquiry of interview schedules for errors and variation in process of data collection. The following statistical techniques were used to analyzed and interpreted. Data entry and analysis was done using statistical package SPSS software (version 20.0). Chi –square was used. Frequency and percentage was calculated for all the socio demographic variable of the respondents from the selected area to find association between socio- demography and awareness about the JSY. Value of $p < 0.05$ was used as the definition of statistical association.

Results Table 1: Socio –Demography

Education	No	%	Religion	No	%	family	No	%
Illiterate	124	59.0	Hindu	108	51.4	Joint	109	51.9
Literate	86	40.9	Muslim	98	46.7	Nuclear	101	48.1
Total	210	100.0	Sikh	4	1.9	Total	210	100.0

According to data gathered majority 124 (59.0%) of the respondents are illiterate. 86 (40.9%) literate women's. Hindu mothers 108 (51.4) and Muslim mother 98 (46.7%) and 4 (1.9) others are taken into study. Depict more number of beneficiaries were found in joint family 109 (51.9%) and nuclear family 101 (48.1%).

Table 2: Distribution of respondent according to awareness about JSY

JSY	Respondents	
AWARENESS ABOUT JSY NO = 210	NO	%
Yes	96	45.7
No	144	54.3
SOURCE OF INFORMATION – NO=96		
ASHA	45	46.8
Doctors	36	37.5
IEC	15	15.0
AWARE ABOUT BENEFITS		
YES	96	45.7
NO	114	54.3
IFA TABLETS		
YES	170	81.0
NO	40	19.0
TETANUS TOXOID INJECTION		
YES	196	93.3
NO	14	6.7
PLACE OF DELIVERY		
Government hospital institutional delivery	108	51.0
Private	23	10.9
Home	51	24.2
Nil	28	13.3
Received cash incentive amount - NO= 96		
Received	64	79.0
Not received	17	20.9
TRANSPORTATION		
Hired vehicle	65	67.7
Ambulance	31	32.9

Source: Researcher Compilation

The point of awareness is of paramount importance for the success of any scheme. This table 2: depicts the information regarding awareness of JSY. It was observed that awareness about JSY among mothers was low as the data shows that 144(54.3%) of the mother are not aware of the scheme and only 96(45.7%) are aware about the JSY scheme. The major source of information placed from ASHA, ANM, AWW 45(46.8%), doctors 36 (37.5%) followed by other sources like IEC 15 (15.0%).The awareness regarding JSY scheme was 96(45.7%) aware of whom 114(54.3%) were not aware regarding possible benefits of JSY. 210 beneficiaries interviewed, about 170 (81.0%) have taken received Iron folic tablets,(IFA) and 40(19.0%) not taken any IFA .The pregnant female who were not consuming IFA tablets. During the study that most of the women benefit IFA tablets at government institution .but majority of them pregnant women they did not received IFA tablets for 100 day but were provided only with a strip of IFA tablets and were told to buy the remaining themselves, which they do not. That almost 196 (93.3%) beneficiaries have received Tetanus Toxoid injection. (88.2%) of beneficiaries received two doses of Tetanus toxoid injection and (16.2%) received one dose. The study shows women's highest received T.T injection. Explain that number of delivery took place at government hospital 108(51.0 %). But from above table it is also revealed that home delivery 51(24.2%) is very common practices in the selected districts s and 23 (10.9%) delivered in private. Among 64 (79.0%) beneficiaries have received cash incentives, among which major beneficiaries 57 (89.1%).There are mothers 17(20%) those didn't received any cash and majority of beneficiaries didn't have the knowledge about any benefit.

Table 3: Association between background Socio Demography and Awareness

Education	Aware		Not aware %			Total	
	No	%	No	%	No	%	
Illiterate	58	46.8	66	53.2	124	100.0	
Primary	21	39.6	32	60.4	53	100.0	
Secondary	8	47.1	9	52.9	17	100.0	
Senior secondary	6	66.7	3	33.3	9	100.0	
Graduation &above	3	42.9	4	57.1	7	100.0	
Total	96	45.7	114	54.3	210	100.0	
x ² = 2.476, df =4, p= .649 Ho :accepted there is no association between							

the education and awareness about the JSY						
Religion of respondent	Aware		Not aware %		Total	
	No	%	No	%	No	%
Hindu	60	55.6	48	44.4	108	100.0
Muslim	34	34.7	64	65.3	98	100.0
Sikh	2	50.0	2	50.0	4	100.0
Total	96	45.7	114	54.3	210	100.0
$\chi^2 = 9.041$, df =2, p= .011 Ho :rejected there is association between the religion and awareness about the JSY						
Type of family	Aware		Not aware		Total	
	No	%	No	%	No	%
Joint family	54	49.5	55	50.5	109	100.0
Nuclear family	42	41.6	59	58.4	101	100.0
	96	45.7	144	54.3	210	100.0
$\chi^2 = 1.338$, df =1, p= .247 Ho :accepted there is no association between the type of family and awareness about the JSY						

Source: Researcher Compilation

The table 3 shows the result of hypothesis which tested the association between the Socio Demography and awareness about the JananiSurakshaYojana among mothers in selected districts of Uttar Pradesh. The results exhibits that the awareness of JSY in Illiterate shows the highest numbers (58) with (46.8%) followed by primary (21) with (39.6%) women. Therefore the results of analysis showed that there is no association between awareness and education about JSY. It was observed that awareness more in Hindu (55.6%) were aware but Muslim (34.7%) was low awareness.(Table :3)There is association between the religion and awareness about the JSY in the selected district of Uttar Pradesh .Only (49.5%) joint family aware about the scheme as

compared to (41.6%) nuclear family awareness. The statistical there is no association between the types of family awareness about the JSY in the selected district of Uttar Pradesh.

Discussion

The point of awareness is of paramount importance for the success of any scheme. This table 2: depicts the information regarding awareness of JSY. It was observed that awareness about JSY only 96(45.7%) are aware about the JSY scheme. So we can state that the accessible knowledge is still not well performance for creating awareness .similar finding Singh et al. only 40.36% have heard about the scheme JSY. Sharma et al. found the study it was seen that 62% of women were not aware of the objective of JSY scheme. About JSY major source of information placed from ASHA, ANM, AWW 45(46.8%), doctors 36 (37.5%) followed by other sources like IEC 15 (15.0%) In a cross sectional based study conducted by Singh vs. et al was found seen that the main source of information was ANM (58.6%) followed by AWW (22.4%) and ASHA (17.2%).similar study Khes et al. source of information about JSY majority came to know by (87.74%) ASHA. The awareness regarding JSY scheme was 96(45.7%) aware of whom114 (54.3%) were not aware regarding possible benefits of JSY. Singh et .al found similar study about 62.1% of the women had no knowledge regarding the objectives of JSY. 210 beneficiaries interviewed, about 170 (81.0%) have taken received Iron folic tablets,(IFA) and 40(19.0%) not taken any IFA .The pregnant female who were not consuming IFA tablets. Those almost 196 (93.3%) beneficiaries have received Tetanus Toxoid injection. (88.2%) of beneficiaries received two doses of Tetanus toxoid injection and (16.2%) received one dose. A study conducted by kumar et. al found was women received full immunization. Malik et .al &Agarwal et. al Similar finding were observed .As compare study Reddy et. al observed majority of beneficiaries received both the doses of tetanus toxoid vaccination. There is no association between Education and awareness about the JSY illiterate women's was more aware than educated women's. Kaushik et.al found 61.9 % illiterate respondent were aware about the JSY. Value was significantly more.

Conclusion

Majority of the respondent respondents were aware about the scheme. It was observed in the study that 30% beneficiaries had received financial assistance under JSY. There was no

association between education and awareness about JSY. this study that with improvement in the ANC utilization increased. That there was no association between education and place of delivery. Increasing awareness about the Janani Suraksh Yojana through information, education and communication (IEC) activities. Benefits of JSY should be explained to pregnant women at the time of pregnancy registration. Stereotype mothers, husbands, mother in laws, sister in laws, other elders women should be counselled about the benefits of institutional delivery, ANC, PNC, IFA tablets, immunization ,contraception, sanitation etc.

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