

IEC PACKAGE ON MATERNAL CARE FOR TRIBAL WOMEN OF RAJASTHAN

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Abstract: Safe motherhood is the fundamental right of each and every woman on this earth. The women living in the urban, rural or tribal vicinity has an equal right to have safe maternity care. Present study has been carried out with 100 tribal women of "Kerwas" village of Pratapgarh District of Rajasthan, India. The objectives of the study was to study the overall effectiveness of the developed IEC package on maternal care in relation to the selected variables viz; age, education, marital status and monthly family income of the respondents. The purposive sampling techniques were used to select the beneficiaries and location of the study. A Pretest – Posttest experimental research design was used. The study was conducted in four phases. In the first phase distribution of the participants has been done according to their residential area, in the second phase pre data were obtained with the help of developed interview schedule. As it was an experimental research, a complete information education and communication package on "Maternal Care" was developed which included, Video films, pictures cards, flash cards, flip book, posters, power point presentations etcetera. In the third phase of the study the knowledge and information was disseminated. In the fourth phase posttest of the respondents was done with the help of developed interview schedule. The mean score of posttest of the respondents was found high and significant at 0.01 level. A significant difference was found between the mean achievement score of maternal care aspect in relation to the age of the respondents 0.01 level and marital status of the respondents at 0.05 levels. No significant differences were found in the mean achievement score of maternal care aspects in relation to education and family income of the respondents. It can be concluded on the basis of above findings that no family income can be intervene in the gain in knowledge of the target group. As the majority of the respondents were illiterate, keeping in mind the information was imparted with the help of various IEC materials and in the posttest, gain in knowledge was found high. Thus it can be concluded that organization and implementation of various IEC Material along with any developmental aspect/issue can be a contributory step towards the development of the needy people of the society.

Key Words: IEC Package, Maternal Care, Tribal Women, Gain in Knowledge.

Introduction: One of the major challenges of "Reproductive Health" in India is addressing the barriers in communication and thereby improving the dialogue between diverse stakeholders, particularly women in the community. In a study, knowledge, traditions, stigma and accessibility of services are identified as the key primary factors affecting decision making of women in the community, particularly on their health related issues (Saha and Somen, 2005). Human Development Report (2015) ranks India at number 130 among 188 countries in terms of overall human development. Women are very vulnerable part of our society and also play a very important role in human development. It proves direct relation with overall health of human too; moreover, women are the backbone of our society and they also have threefold responsibility of farm, home and communities. This directly affects women's health specially "Reproductive health" or "Reproductive Health" affects their responsibilities i.e. vice-versa. Cairo Programme for International Conference on Population and Development (ICPD, 1994) stated that the reproductive health means "...a state of complete, physical, mental and social well-being and not merely the absence of diseases or infirmity, in all matters relating to the reproductive system and to its

functions and processes". Reproductive health therefore, implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so. Implicit in this are the rights of men and women to be informed and to have access to safe, effective, affordable, and acceptable methods of family planning of their choice, and the right to appropriate health-care services that enable women to safely go through pregnancy and childbirth.

Safe motherhood is one of the import factors that contribute a lot to improve or deteriorate the reproductive health of women.

Compared to modern women, tribal women have very little wealth of their own or of their families. They have just a piece of coarse cloth to cover their womanhood. They are very fond of ornaments, yet have just one or two strings of red, blue or white beads. In addition, they may have some bangles, earrings and necklaces made of cheap metal. That materialistic comforts and riches are not the indices of happiness is well illustrated by the tribal women (Kamat, 2006). They are the most neglected part of our society, as they have less recognition and less health care services and facilities, despite offered by

the government and such related institutions and organizations.

Much of the information, awareness and services pertaining to reproductive and sexual health provided by the stakeholders, do not reach to these isolated and poor women of tribal areas. The main constraining factors that have been identified are as follows:

1. The health of women, especially reproductive health, women remains neglected in rural India.
2. Tribal women are not aware about the importance of reproductive health.
3. The cultural taboos and myths are still prevalent among them.
4. Less care during reproductive or for any health problems.
5. Prevalence of unhealthy health care practices.

Along with above discussions some research questions arise which are as follows:

- Do women (especially, tribal women) be able to know more about their Reproductive Issues especially Safe motherhood and its concerns?
- Can an Instructional Educational Package covering various related study materials on maternal care, be able to contribute to their knowledge?

Keeping in mind present investigation has been planned with following objectives viz;

1. To develop Information, Education and Communication package on Maternal care aspect for tribal women.
2. To study the effectiveness of developed Information Education and Communication package on "Maternal Care" in relation to following selected variables:
 - A. Age
 - B. Education
 - C. Marital Status
 - D. Monthly Family Income

Assumption: Tribal women will be able to gain knowledge on "Maternal Care" aspect of Reproductive Health.

Hypothesis: framed for the present study was, there will be no significant difference between the mean achievement scores of the respondents regarding "Maternal Care" in relation to following selected variables:

- A. Age
- B. Education
- C. Marital Status
- D. Monthly Family Income

Delimitations: Present study was delimited to the tribal women of "Kerwas" village of Pratapgarh District of Rajasthan only.

Methodology: A pretest - posttest experimental design was selected for present research purpose. "Kerwas" village from **Pratapgarh Panchayat**

Samiti was considered for the present investigation. This village has 100 percent tribal predominated population and is also adopted by the "Krishi Vigyan Kendra" on the basis of its tribal population. A sample comprised of hundred women for the present investigation from the selected village. Purposive sampling technique was used to select the sample i.e. 100 tribal women of 15 - 50 years, who were willing to participate in the study.

Development of IEC Package: IEC Package containing various informative and educational materials i.e. Charts, Posters, Flash Cards, Flip Book was developed and few of the educational materials were taken pre-prepared by various agencies. The above IEC materials were prepared and assembled covering maternal care aspect and various related sub aspects which include: Process of Reproduction, Pregnancy Symptoms, Stages and Childbirth Process and Prenatal and Postnatal Care. All the content and material was developed and validated by the various experts and modified according to the need.

Development of Research Tool: A structured interview schedule was prepared on various sub-aspects of maternal care, validated and modified. Test - retest method was applied for checking reliability of developed interview schedule.

Experimentation of the Study: Selected respondents were pretested with the developed interview schedule, education and information was disseminated with the help of illustrative talk, group discussion method and educational game. Latterly Posttest of the respondents was done after implementation of the package.

Findings of the study: there was a remarkable difference found in terms of gain in knowledge and awareness of the respondents noted in total mean score of pre test and total mean score of post test of the respondents on maternal care aspect

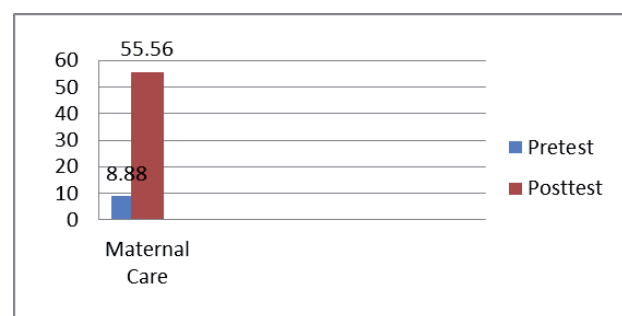


Figure 3 Effectiveness of Developed IEC Package in terms of increased mean score of the Respondents $n=100$

Figure 1 clearly showing the gain in knowledge of the respondents after implementation of the package.

Table 1 Effectiveness of IEC Package on Maternal Care Aspect n=100

Maternal Care	Test	Mea n	SD	t- value	Sig. (2-tailed)*
	Pre-test	8.88	3.767	-82.39	0.01*
Posttest	55.56	3.991			

* Significant at 0.01 level

The mean of pretest of Maternal Care aspect was 8.88 which were than increased by 55.56. The significant value was calculated -82.39 shows marked improvement in gain in knowledge regarding selected aspect. Thus the hypothesis that there will no significance difference in mean achievement score in pretest and posttest of the Maternal Care was not accepted as it was found significant at 0.01 level.

Table 2 Analysis of Variance between Mean achievement Scores of Respondents Regarding Maternal Care in Relation to Age of the Respondents n=100

S. No.	Age (in Years)	n	Mean	SD	df	F	Sig.
1.	15-30	47	56.74	3.773	99	4.12	0.01*
2.	31-45	37	54.62	4.105			
3.	> 45	16	54.25	3.550			

*Significant at 0.01 level

Data was found significant at 0.01 level with the various mean achievement scores according to various age groups of the respondents. It can be concluded that the age may affect the gain in knowledge of the tribal women. (Table 2)

It was found from the post hoc analysis that within the category the difference were noted. The lowest mean difference was noted between young age group and middle age group. Hence it can be said that the significant difference was came out according to various age group of the respondents. This variable focused on how various age groups can affect the gain in knowledge and awareness of the respondents. Again it can be concluded that the experiential learning may contributory factor for the respondents to find the significant difference and the mean achievement score.

There was no significant difference found in total mean score of post test of the respondents regarding Maternal Care in relation to educational status of the respondents. Hence the hypothesis was accepted.

There was no significant difference found in total mean score of post test of the respondents regarding Maternal Care in relation to marital status of the respondents. Hence the hypothesis was accepted.

There was no significant difference found in total mean score of post test of the respondents regarding Maternal Care in relation to monthly family income of the respondents. Hence the hypothesis was accepted.

Therefore it can be concluded that an effective package including various illustrations can bring the desirable changes in the society and can also educated them to improve their health, as well as make them aware to utilize the services actually meant for them.

Implications and Suggestions: Present study contributed to the gain in knowledge of the tribal women selected as respondents regarding maternal care and its sub-aspects.

Implication of the study: The following implications and strategies emerged out form the empirical data drawn from the present investigation, which is listed down below:

For policy makers

- There was a gap found between the present health care system and the people of the particular area. So the door to door policy with having orientation for group of individual may work effectively.
- There should be achievable goal can be set according to the people of the area with the utmost utilization of nearby available resources.
- The various models and modules on various Reproductive Health Aspects viz, Menstruation, Menopause, Maternal care, STDs RTIs and family planning can be developed as per the need of the area and people of area.

For Academicians

- Curriculum related to such aspects can be a contributory effort at school level.
- The establishments of linkages with the education system along with the health maker can provide contributory effort towards health improvement especially of tribal women of any area.

For Various Developmental Agencies

- A joint collaboration with policy makers and strategy developer at various levels can make a sense for utilization of services meant for them for their betterment.
- Various staff at various levels should always be trained according to the culture and language of the tribal area.

Suggestions for the future Researches:

- Development of e-content on various related aspects can bring the behavioral changes among any group of people.

- As the present study was focused on the tribal, similarly adolescents and youth can also be benefitted.
- This was the research with tribal and women oriented; such researches can also be carried out with rural as well as urban female and male too.

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