A Study on Dr. muthulakshmi Reddy Maternity Benefit Scheme: Comparative Analysis

¹N. Mani, ²G. Arivalagan

¹Associate Professor and H.O.D, Department of Economics, Erode Arts and Sciences College – Erode – 638009.
²Department of Economics, Erode Arts and Sciences College – Erode – 638009.

Abstract: India has a very large population and its rate of growth is also fast. As a result every year the addition made to the population is very large. The growth rate of population has also adversely affected the saving rate. This has happened because the fast growing number has resulted in large resources being used to meet increasing consumption needs like food, clothing, shelter, education, health facilities. India is first among the countries which adopted an official family planning programme as early for control the over population. The main objective of the present study is to analyse the socio- economic conditions of family planning adopting persons under the health scheme of Dr.Muthulakshmi Reddy Maternity Benefit Scheme in the selected areas, (Mugavanurpanchayat&Manathattaipanchayat) to examine the reasons for both adopted and non- adopted family planning persons under the health scheme and to analyse health care facilities in the selected areas. This study is based on both primary and secondary data. The secondary data was extracted from primary health centre in selected areas and the primary data have been collected through a structural questionnaire. A total of 112 respondents from Mugavanur panchayat in Trichirappalli District and 104 from Manathattai panchayat in Karur District have been selected. Random sampling method has been adopted in this study and statistical tool has been for analysis. From the overall analysis, it is evident that the respondents were benefited through Dr.Muthulakshmi Reddy Maternity Benefit Scheme. Around 90 per cent of the respondents did not adopt the family planning and they have an expectation of male child and having only one baby. Only 10 per cent of the respondents has availed the facility of family planning. It is concluded that more awareness has to be created among the rural people about family planning and gender equality.

INTRODUCTION

India has a very large population and its rate of growth is also fast. As a result every year the addition made to the population is very large. This population growth is undesirable. It obstructs faster economic growth and economic growth takes place is not fully reflected in the rising income level. India now has a population of 1.21 billion, comprising 624 million males and 587 million females. This is an increase of 181 million people since the census 2001 which is nearly equivalent to the population of Brazil. Indian population growth rate has decelerated to 17.64 percent in decade 2001-2011. According to 2011 census, the total Indian population was 121.02 crore, it overtakes China to become the most populous country on the earth with 19.4 per cent population living here. Therefore, the Indian government has introduce family planning system through some health scheme like Dr.Muthulakshmi Reddy Maternity Benefit Scheme for control the over population.

India is first among the countries which adopted an official family planning programme as early. However, fifty years later this has not prevented the population touching the one billion mark. Family planning and health centres were set up in urban, semi-urban and rural areas. These centres besides educating the people about family planning also provide facilities like immunization other health services. These centres also provide various devices for birth control.

IMPORTANCE OF STUDY

The population explosion has become a great problem in our country. It is clearly that India's larger population base and its high growth rate creates serious problems. It is also clear that the only way to reduce the high growth rate is to rapidly reduce the birth rate. The information about family planning is practical use to policy makers and programme administrators for formulating policies and strategies. Training institutions have been set up to train family planning workers. Various research centres have also been set up.

STATEMENT OF THE PROBLEMS

The growth rate of population has adversely affected the saving rate. This has happened because the fast growing number has resulted in larger resources being used for meeting increasing consumption needs like food, clothing, shelter, education, health facilities. It has also aggravated the problem of unemployment and poverty which is in turn has created many social and political tensions. The existing shortages of intra structural facilities such as electricity, transport become more acute. And above all the quality of human life remains poor which is reflected in low literacy rate, low life expectancy, non-availability of drinking water to vast population, poor housing, malnutrition and high infant mortality rate. Therefore the government have been adopted various kinds of methods for reducing births. In motivating people to practice birth control methods, various types of incentives such as cash, additional increment in salary are provided through some health scheme like Dr.Muthulakshmi Reddy Maternity Benefit Scheme. This tries to analyses the real situation of Dr.Muthulakshmi Reddy Maternity Benefit Scheme in selected area.

OBJECTIVES OF THE STUDY

1. To analyse socio-economic conditions of the beneficiary under the health scheme Dr. Muthulakshmi Reddy Maternity Benefit Scheme in selected area.

2. To analyse the availability and utilization of health care facilities in selectedarea.

3. To examine the reasons for both adopted and non-adopted family planning persons under the health scheme Dr. Muthulakshmi Reddy Maternity Benefit Scheme in selected area.

METHODOLOGY

This study area of Mugavanur Panchayat is in Manapparai Taluk of Tiruchirappalli District and Manathattai Panchayat is in KulithalaiTaluk of Karur District. This study is based on both primary and secondary data. For the primary data Mugavanur Panchayat and Manathattai Panchayat from Tiruchirappalli District and Karur District have been selected respectively. Primary data have been collected through a structural questionnaire. The secondary data have been collected from the village primary health centre in Vaiyampatty block and Kulithalai block. Systematic random sampling techniques have been adopted. A sample of 216 respondents has been selected for the study. The collected data have been analyzed by using percentage methods.

Results and Discussion

The informations have been collected from interview basis. This study is an attempt to the aspects relating to the successive rate of Dr.Muthulakshmi Reddy Maternity Benefit Scheme in the selected data.

Age of the Respondents

Age is one of the eligibility criteria of MRMBS. Above 19 years completed woman only eligible for this scheme.

The below table reveals that majority (90.27 per cent) of the respondents were belong to the age group of 20-30 years, and (9.73 per cent) of the respondents were belong to the age group of 31-40 years. Making comparison between the both panchayats above 40 years age group of woman was not willing to pregnancy and also the violation of the rules and norms not occurring.

Table – 1 Age of the Respondent

| S. No | Age Group | No. of Respondents | | Total (%) |
		Mugavanur(%)	Manathattai(%)	
1	20-30	107 (95.54)	88 (84.61)	195 (90.27)
2	31-40	05 (4.46)	16 (15.39)	21 (9.73)
Total		112 (100)	104 (100)	216 (100)

Source: Primary data

RESPONDENTS' EDUCATIONAL LEVEL

On the basis of formal education, the respondents are classified as illiterate, school level and college level and presented in the following table.

Table – 2 Respondents' Educational level

| S. No | Educational Level | No. of Respondents | | Total (%) |
		Mugavanur(%)	Manathattai(%)	
1	Illiterate	14 (12.5)	01 (0.96)	15 (7)
2	School	91 (81.3)	90 (86.54)	181 (83.8)
3	College	7 (6.2)	13 (12.5)	20 (9.2)
Total		112 (100)	104 (100)	216

Source: Primary data

The above table envisages that majority (83.8 per cent) of the respondents has school level education, and only 9.3 per cent of the respondents were has studied degree as their education status in this study area. There is no colleges nearby the villages, so most of respondents unable to get college degree. Since schools are nearby the villages, the school level education was more in this study area. Around 7 percent of the respondents were illiterate. When make the comparison take place between the two panchayats, Manathattaipanchayat has registered better percentage than Mugavanurpanchayat in terms of education at school level and college level and lees than in term of illiterate (0.96 per cent). It is evident from the analysis that Manathattaipanchayat has well educated people and high utilization of MRMBS scheme.

Respondents' Occupations

Details of occupations of respondents are classified as agriculture, housewife, professional, business, employees and others like coolie. The classification of occupational status is presented in theTable-3.

The table reveals that more than 42 per cent of the respondents were housewife, it was found that all were unemployed, and 35.2 per cent of the respondents were involved in other types of work because majority of the respondents were getting school level of education and illiterate so they are not eligible for professional related works from rural areas and remaining 21.3 per cent of the respondents were involved in agriculture work. While make to comparison between the two panchayats, Manathattaipanchayat has better percentage compare than by involving in Mugavanurpanchayat other works like daily wage worker but it has less number of housewife (28.86 per cent). From the analysis Manathattaipanchayat were involving all type of works.

Table – 3 Occupation of the Respondents

S. No	Occupation	No. of Respondents		Total (%)
		Mugavanur (%)	Manathattai (%)	
1	Agriculture	29 (25.8)	17 (16.34)	46 (21.3)
2	Housewife	62 (55.4)	30 (28.86)	92 (42.5)
3	Professional	0	0	0
4	Business	0	02 (1.92)	02 (1)
5	Employees	0	0	0
6	Others (coolie)	21 (18.8)	55 (52.8)	76 (35.2)
Total		112 (100)	104 100)	216 (100)

Source: Primary data

Wage Per Day

The daily wages of respondents' spouse range from minimum amount of Rs.500. On the basis wage per day are classified in to five categories. The detail of daily wage of respondents is presented in the Table-4. It shows that majority (42.6 per cent) of the respondents were earning daily wage range between Rs.201- Rs.300, 18 per cent of the respondents were earning daily wage of Rs.101- Rs.200 then 16.2 per cent of the respondents were earning as wage range of Rs.301- Rs.400, only 14.8 per cent of the respondents were earning daily wage of less than Rs.500. In this study area daily wage i.e. upto Rs.300 earning persons were more because more respondents studied upto school level education so they were eligible for non-professional work only. Making comparison between the two panchayats, Manathattaipanchayat has well document than Mugavanurpanchayat on basis of income earing per day. Around 25 per cent of the respondents were earning their wage Rs.400- Rs.500 in a day because they had better education at school and college level, so they had some knowledge in techniquework.

Table – 4 Wage per Day of the Respondents' Spouse

S. No	Wage/Day (Rs/-)	No. of Respondents		Total (%)
		Mugavanur (%)	Manathattai (%)	
1	0-100	18 (16.1)	0	18 (8.4)
2	101-200	30 (26.8)	9 (8.6)	39 (18)
3	201-300	42 (37.5)	50 (48.2)	92 (42.6)
4	301-400	15 (13.4)	20 (19.2)	35 (16.2)
5	401-500	7 (6.2)	25 (24)	32 (14.8)
Total (100)		112 100)	104	216

Source: Primary data

Family Monthly Income

The monthly income of respondents range from Rs.1,000 to Rs.15,000 and it is classified into three categories. It is one of the important variable and eligibility criteria for applying of MRMBS. The details of income of the respondents are presented in Table-5.

It is found from the below table that majority (56 per cent) of the respondents were earning their monthly income upto- Rs.5,000, 27.3 per cent of the respondents were earning monthly income from Rs.5,001 to Rs.10,000 and only 16.7 per cent of the respondents were earning income between Rs.10,000 to Rs.15,000. In this study, monthly income of Rs.5,000 earning persons were high because of the agriculture work was seasonality work and also per day wage earning persons was more. While make to relating between the two panchayat, Manathattaipanchayat has well evidence than Mugavanurpanchayat on basis of income earning per month, because they had well education than Mugavanurpanchayat and they earned more wagealso.

Table – 5 Family Monthly Income of the Respondents

S. No	Family Income (Rs)	No. of Respondents		Total (%)
		Mugavanur (%)	Manathattai (%)	
1	Upto-5,000	83 (75)	38 (36.5)	121 (56)
2	5,001-10,000	19 (16.1)	40 (38.5)	59 (27.3)
3	10,001- 15,000	10 (8.9)	26 (25)	36 (16.7)
Total (100)		112 (100)	104	216

Source: Primary data

Family Monthly Expenditure

Table – 6 presents details of expenditure of respondents. It clearly shows that 56.5 per cent of the respondents (122) were spending their monthly expenditure upto Rs.5,000, 30 per cent of the respondents (65) were spending from Rs.5,001 to Rs.10,000 and 13.5 per cent of the respondents (29) were spending their monthly expenditure between Rs.10,000 to Rs.15,000. It has been identified from the analysis that except 9 per cent of the respondents (10) all respondents were spending more or less equal to their family requirements. When make the comparison between the two panchayats, nearly 20 per cent of the respondents were spending their monthly expenditure within income sources in both panchayats.

Table – 8 Number of Babies of the Respondents

S. No	No. of Babies	No. of Respondents		Total (%)
		Mugavanur (%)	Manathattai (%)	
1	1 Baby	49 (43.8)	39 (37.5)	88 (41)
2	2 Babies	45 (40.2)	43 (41.4)	88 (40.7)
3	3 Babies	11 (9.8)	22 (21.1)	33 (15.3)
4	More than 3 Babies	2 (1.8)	0	2 (0.92)
5	No Baby	5 (4.5)	0	5 (3)
	Total (100)	112 100)	104	216

Source: Primary data

Table-8 clearly reveals that about 41 per cent of the respondents were having only one baby in their family because of those respondents were young age group, another 40.7 per cent of the respondents were having two babies in their family, and 15.3 per cent of the respondents were having three babies in their family. An interacting thing has noticed that1.8 per cent of the respondents were having more than three babies in their family because of expectancy to have a male child. It sham that the male child are having more importance in rural area. Nearly 3 percent of the respondents who come under MRMBS have no baby because the infants died due to heart dieses. Make the comparison between the two panchayats on the basis of number of babies in a family, Manathattaipanchayat has registered better picture than Mugavanurpanchayat. Around 5 percent of respondents were not having baby after delivery due to bad health condition of infant in Mugavaurpanchayat. In Manathattaipanchayat any infant deaths did not found after delivery.

Easons to Choose PHC & GH

The reason to choose the government institution for getting the delivery treatment are classified a good treatment, good medicine, infrastructure, amount and other reason. The reason to choose the government institutions presented in the below table.

Table – 9 Reasons to Choose PHC and GH

S. No	Reasons	No. of Respondents		Total (%)
		Mugavanur (%)	Manathattai (%)	
1	Good Treatment	11 (9.8)	30 (28.5)	41 (19)
2	Good Medicine	23 (20.5)	30 (28.5)	53 (24.5)
3	Infrastructure	4 (3.6)	10 (9.3)	14 (6.5)
4	Monetary benefit	4 (3.6)	3 (2.9)	7 (3.2)
5	Daily checkup	27 (24)	0	27 (12.5)
6	Private Hospital	43 (38.5)	31 (29.8)	74 (34.5)
Total (100)		112 100)	104	216

Source: Primary data

Table-9presents the details about reason for choosing PHC and GH. Out of the 216 respondents, majority (65.5 per cent) of them were choosing Government hospital and PHC for treatment because of good treatment (19), Good Medicine (24.5), Infrastructure (6.5), monetary benefit (3.2) and daily checkup (12.5). The remaining 34.5 per cent of the respondents were choosing private hospital for delivery treatment because lack of transport, facility, migration for job and the respondent's first delivery was under care of their parents. Manathattaipanchayat has well evidence, while comparison than Mugavanurpanchayat on basis of choosing government institution for availing treatment. Because of they were provided good medicine, good treatment and good infrastructure. Around 35 per cent of the respondents were use private hospital because lack of transport facilities from their village to government hospital but those respondents took treatment in beginning from thePHC.

Satisfaction of Doctors Treatment

The level of satisfaction of doctors' treatment was classified into four categories, i.e. highly satisfied, moderately satisfied, just satisfied and not satisfied. The details have been collected respondents in the study area.

Table – 10 Satisfaction of Doctors Treatment

S. No	Level of Satisfaction	No. of Respondents		Total (%)
		Mugavanur (%)	Manathattai (%)	
1	Highly Satisfied	31 (27.6)	54 (52)	85 (40)
2	Moderately Satisfied	41 (36.5)	34 (32.7)	75 (35)
3	Just Satisfied	26 (23.4)	6 (5.8)	32 (14)

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4	Not Use	14 (12.5)	10 (9.5)	24 (11)
Total (100)		112 (100)	104	216

Source: Primary data

The above table clearly shows that around 40 per cent (85) of the respondents were highly satisfied with the doctors' treatment at the PHC level, then 35 per cent (75) of the respondents were moderately satisfied and only 14 per cent (32) of the respondents were just satisfied with doctors' treatment. The analysis shows that there is a different between the panchayats about satisfaction of doctors' treatment. Making comparison between the panchayats, Manathattaipanchayat has better report than Mugavanurpanchayat in terms of satisfaction of doctors' treatment, nearly 24 respondents were not use because lack transport and migrated for job in both panchayat. Majority i.e. 84.5 per cent & 90.4 per cent of the respondents have benefited under this scheme in Mugavanurpanchayat and Mnathattaipanchayat respectively.

Monetary Benefit of MRMBS

The detail of amount of MRMBS of old scheme was Rs.6,000 and the new is Rs.12,000. It was given to the beneficiaries through their bank account on installmentsbasis.

S. No	Amount (Rs)	No. of Respondents		Total (%)
		Mugavanur (%)	Manathattai (%)	
1	6,000	23 (20.5)	12 (11.5)	35 (16.2)
2	6,000+12,000	8 (7.1)	0	8 (3.7)
3	6,000+8,000	4 (3.5)	0	4 (1.9)
4	6,000+4,000	5 (4.5)	0	5 (2.3)
5	12,000	27 (24.1)	51 (49.3)	78 (36)
6	12,000+8,000	3 (2.7)	0	3 (1.4)
7	8,000	11 (9.9)	0	11 (5.5)
8	4,000	17 (15.2)	31 (29.8)	48 (22)
9	Not Get Money	14 (12.5)	10 (9.6)	24 (11)
Total (100)		112 (100)	104	216

Source: Primary data

The table clearly shows that about 36 per cent of the respondents were getting full amount as per new MRMBS

based on the installment amount of Rs.12,000, around 22 per cent of the respondents received monetary assistance under from scheme amount of Rs.4,000 and 1.9 per cent of the respondents received money under the old and new scheme with the amount of Rs.6,000+8,000, because the respondents received money for first two babies. Nearly 11 per cent of the respondents did not get any amount under the scheme because they did not submit full documents. When make comparison between Mugavanurpanchayat and Manathattaipanchayat, it clearly shows that Manathattaipanchayat has well documented than Mugavanurpanchayat in regarding claim monetary assistance under the MRMBS. Maximum they were benefiting under this scheme except (9.6 per cent) because they were migrate from their village to city for searching job and not submitted full documents for applying this scheme to the village healthnurse.

CONCLUSION

From the overall analysis, it is evident that the respondents were benefited through Dr.Muthulakshmi Reddy Maternity Benefit Scheme. Around 90 per cent of the respondents did not adopt the family planning and they have an expectation of male child and having only one baby. Only 10 per cent of the respondents has availed the facility of family planning. It is concluded that more awareness has to be created among the rural people about family planning and genderequality.

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