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Signal functions for measuring availability of emergency obstetric care services in public health facilities in India

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A lthough India achieved a 65% decrease in maternal mortality rate (MMR), still it contributed the largest proportion (17%; 50,000 deaths) of maternal deaths in the world. Utilization of emergency obstetric care services can drastically reduce maternal deaths in most of the developing countries. This study aims to explore the availability and readiness of Emergency Obstetric Care (EmOC) Services in Public Health Facilities in India. It also investigates the geographical pattern and differentials in the availability of EmOC services. Availability of EmOC services can be measured by applying the criteria for health facilities recommended by the United Nations. These criteria provide nine signal functions. Presently, 19% of the health facilities are served by EmOC services, including 13% by BEmOC and 6% by CEmOC services. The distribution of these services varies across the country. When measured against the UN criteria of at least one CEmOC and four BEmOC facilities per 500,000 population, the results of this study show that only 1.3 EmOC facilities are available per 500,000 population. We also found that only three out of thirty-six states in the country have the UN-recommended number of EmOC facilities. This study highlights the importance of Emergency Obstetric Care (EmOC) services and provides useful information about the availability of public health facilities which will help policy makers and programmers to measure and improve the performance of public health facilities, as well as monitor the progress being made towards achieving the crucial fifth-millennium development goal.

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