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A STUDY ON MATERNAL HEALTH PROBLEMS WITH REFERENCE TO SELF HELP GROUP WOMEN AND NON SELF HELP GROUP WOMEN IN MADURAI DISTRICT

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ABSTRACT

Safe motherhood refers to a woman's ability to have a safe and healthy pregnancy and delivery. The goal of safe motherhood is to ensure that every woman has access to a full range of high-quality, affordable sexual and reproductive health services especially maternal care and treatment of obstetric emergencies to reduce deaths and disabilities. This paper deals with maternal health problems of self help group women and non self help group women. It outlines the various indicators of maternal health problems and such indicators are quantified on the basis of 5 point rating scale. This paper concludes with some interesting findings.

KEYWORDS: self help group, Malnutrition, malnourished, maternal infections

INTRODUCTION

Malnutrition is one of the maternal health problems in India. In India most of the poor households are malnourished. Malnutrition has already affecting the pregnant women lactating women and children. Malnutrition among pregnant women develops health problems particularly anemia problem, post partum hemorrhage problem and pregnancy complication coupled with birth of baby with low birth weight. Hence, there is a need to prevent malnutrition among pregnant women and lactating mothers by the ways of nutritional food

supplementation, taking iron and folic acid tablets and taking green leafy vegetables.

Infection can be prevented during the time of pregnancy. In India infection has been controlled to a major level, but maternal infection has been continued. It could be noted that maternal infections results in development of health problems particularly intra uterine growth restriction, new born children with low birth weight, abortion occurrence and puerperal sepsis. It could be observed that 25 per cent of pregnant women have urinary tract

infections. Some of the pregnant women have infections of cytomegalo virus, herpes and toxoplasma. Such type of infection during maternity period can be controlled through proper recommended appropriate immunization, taking adequate quantity of hygienic nutritious food, access to better sanitation and keeping household in a good sanitation condition and better utilization of primary health care services. Further uncontrolled reproduction is another aspect of maternal health problem. Such type of behavior can affect both mother and child. The low birth spacing results in inadequate care for the existing child and such scenario brings risk of health problems during pregnancy. The risk occurs severely during the time of fourth pregnancy. Therefore adherence to family planning programme is very essential. In this situation, women should make use of intra uterine contraceptive devices, oral contraceptive pills, long acting injectable medroxy progesterone acetate, female sterilization and rhyam method.

Fistula is an incidence of painful child birth scenario. This type of child birth mainly takes place in developing country like India. In such countries women give birth without proper prenatal care and give child birth in the form of baby's head is constantly pushing against the mother's pelvic bone. The pushing process creates a hole on fistula between birth passage and other organs. This situation prevents women from fertilizing another fetus. This type of problem to be prevented during the time of pregnancy.

METHODS AND MATERIALS

This study examines the Maternal Health Problems of rural women of six selected block head quarters villages in Madurai district. This study makes a comparison between women of self help groups and non self help groups in their Maternal Health Problems. From each village 50 rural women including 25 self help group women and 25 non self help group women are selected as sample. In total 300 women are selected as sample under simple random sampling method. The relevant data are collected from them with the help of interview schedule method. The collected data are classified and tabulated with the help of computer programming. The data analysis is done with the help of percentage and chi square test.

WOMEN RESPONDENTS' RATING ON MATERNAL HEALTH PROBLEMS

This section deals with women respondents' rating on maternal health problems. It can be assessed with the help of 22 factors on a 5 point rating scale. These include severe headache, blurred vision, respiratory difficult, fever, severe abdominal pain, vaginal bleeding, less movement of the fetus, convulsion, foul smelling discharge from vagina, maternal depression, excessive fatigue, swelling of the legs, obstructed labour, obstetric fistula, anemia, postpartum depression, obstetric hemorrhage, incontinence, pregnancy related infection, vomiting sensation, obesity and embolism.

Table 1 Women Category Wise Women Respondents' Rating on Maternal Health Problems

Variables	Self help group women	Non Self help group women	Mean
Severe headache	2.31	2.89	2.60
Blued vision	1.81	2.39	2.10
Respiratory difficult	2.14	2.72	2.43
Fever	3.80	4.18	3.99
Severe abdominal pain	2.45	3.03	2.74
Vaginal bleeding	3.08	3.66	3.37
Less movement of the fetus	2.72	3.30	3.01
Convulsion	3.58	4.16	3.87
Foul smelling discharge from vagina	2.99	3.57	3.28
Maternal depression	3.34	3.92	3.63
Excessive fatigue	1.93	2.51	2.22
Survelling of the legs	3.90	4.20	4.05
Obstructed labour	2.23	2.81	2.52
Obstetric fistula	2.38	2.96	2.67
Anemia	3.19	3.77	3.48
Postpartum depression	2.11	2.49	2.30
Obstetric hemorrhage	2.64	3.22	2.93
Incontinence	2.79	3.37	3.08
Pregnancy related infection	4.03	4.21	4.12
Vomiting sensation	3.50	4.08	3.79
Obesity	4.16	4.20	4.18
Embolism	2.88	3.46	3.17
Average	2.91	3.41	3.16

Source: Computed from the primary data

T Statistical Value 15.53, df 21, T Critical Value 1.72

Data presented in table 1 indicate the women category wise self help group and non self help group wise women respondents' rating on maternal health problems. It could be noted that out of the 22 maternal health problems, the women respondents rate the obesity is the first level maternal health problem and it is evident from their secured a mean score of 4.18 on a 5 point rating scale. Pregnancy related infection is rated at second level maternal health problem and it is estimated from the women respondents' secured a mean score of 4.12 on a 5 point rating scale. The women respondents rate the occurrence of survelling of the legs as their third level maternal health problem. It is evident from their secured a mean score of 4.05 on a 5 point rating scale. The women respondents perceive the fourth level maternal health problem in the form of occurrence of the fever and it is observed from the women

respondents' secured a mean score of 3.99 on a 5 point rating scale. Convulsion is rated at fifth level maternal health problem and it could be known from the women respondents' secured a mean score of 3.87 on a 5 point rating scale.

The women respondents rate the vomiting sensation as their realized sixth level maternal health problem and it is known from their secured a mean score of 3.79 on a 5 point rating scale. Maternal depression is rated at seventh level maternal health problem and it observed from the women respondents' secured a mean score of 3.63 on a 5 point rating scale.

The women respondents report the anemia as their observed eighth level maternal health problem. It is evident from their secured a mean score of 3.48 on a 5 point rating scale. The women respondents realize the ninth level maternal health problem by citing fact that occurrence of vaginal

bleeding as per their secured a mean score of 3.37 on a 5 point rating scale. Foul smelling discharge from vagina is rated at tenth level maternal health problem and it is evident from the women respondents' secured a mean score of 3.28 on a 5 point rating scale.

The women respondents' rate the embolism as their eleventh level observed maternal health problem and it could be known from their secured a mean score of 3.17 on a 5 point rating scale. Incontinence is rated at twelfth level maternal health problem and it is reflected from the women respondents' secured a mean score of 3.08 on a 5 point rating scale. The women respondents observe the thirteenth level maternal health problem by citing the fact that less movement of the fetus. It is evident from their secured a mean score of 3.01 on a 5 point rating scale. The women respondents report the fourteenth level maternal health problem by citing the prevalence of obstetric hemorrhage and it is clear from their secured a mean score of 2.93 on a 5 point rating scale. Severe abdominal pain is rated at fifteenth level observed maternal health problem as per the women respondents' secured a mean score of 2.74 on a 5 point rating scale.

The women respondents' rate the obstetric fistula as their sixteenth level observed maternal health problem and it is revealed from their secured a mean score of 2.67 on a 5 point rating scale. Occurrence of severe headache is rated at seventeenth level observed maternal health problem and it is reflected from the women respondents' a secured a mean score of 2.60 on a 5 point rating scale. The women respondents report the maternal health problem by citing the condition of obstructed labour and it is evident from their eighteenth level observation. It is known from their secured a mean score of 2.52 on a 5 point rating scale. The women respondents realize the nineteenth level maternal health problem by citing the condition of respiratory difficult as per their secured a mean score of 2.43

on a 5 point rating scale. Postpartum depression is rated at twentieth level maternal health problem and it is known from the women respondents' secured a mean score of 2.30 on a 5 point rating scale. The women respondents realize the twenty first level maternal health problem by citing the fact that excessive fatigue as per their secured a mean score of 2.22 on a 5 point rating scale. Blued vision is rated at twenty second level maternal health problem and it is known from the women respondents' secured a mean score of 2.10 on a 5 point rating scale.

The non self help group women respondents' rank the first position in their overall rated maternal health problems as per their secured a mean score of 3.41 on a 5 point rating scale. The self help group women respondents record the second position in their overall rated maternal health problems and it is known from their secured a mean score of 2.91 on a 5 point rating scale.

The T test is applied for further discussion. The computed t value 15.53 is greater than its tabulated value at 5 per cent level significance. Hence there is a significant difference between self help group women respondents' and non self help group women respondents' in their overall rated maternal health problems during pregnancy.

Data presented in table 2 indicate the village wise women respondents' rating on maternal health problems during pregnancy. The Alanganallur village women respondents' rank the first position in their overall rated maternal health problems during pregnancy as per their secured a mean score of 3.50 on a 5 point rating scale. The Vadipatti village women respondents' record the second position in their overall rated maternal health problems during pregnancy as per their secured a mean score of 3.37 on a 5 point rating scale. The Melur village women respondents' register the third position in their overall rated maternal health problems during pregnancy as per their secured a mean score of 3.23 on a 5 point rating scale.

Table 2 Village Wise Women Respondents' Rating on Maternal Health Problems

Variables	Alanganallur	Vadipatti	Melur	Sedapatti	Usilampatti	Kottampatti	Mean
Severe headache	3.01	2.86	2.67	2.53	2.34	2.19	2.60
Blued vision	2.41	2.26	2.17	2.03	1.94	1.79	2.10
Respiratory difficult	2.84	2.69	2.50	2.36	2.17	2.02	2.43
Fever	4.22	4.15	4.10	3.98	3.83	3.66	3.99
Severe abdominal pain	3.15	3.00	2.81	2.67	2.48	2.33	2.74
Vaginal bleeding	3.78	3.63	3.44	3.30	3.11	2.96	3.37
Less movement of the fetus	3.42	3.27	3.08	2.94	2.75	2.60	3.01
Convulsion	4.18	4.13	3.94	3.80	3.66	3.51	3.87
Foul smelling discharge from vagina	3.69	3.54	3.35	3.21	3.02	2.87	3.28
Maternal depression	4.04	3.89	3.70	3.56	3.37	3.22	3.63
Excessive fatigue	2.53	2.38	2.29	2.15	2.06	1.90	2.22
Survelling of the legs	4.16	4.12	4.11	4.08	3.99	3.84	4.05
Obstructed labour	2.93	2.78	2.59	2.45	2.26	2.11	2.52
Obstetric fistula	3.08	2.93	2.74	2.60	2.41	2.26	2.67
Anemia	3.89	3.74	3.55	3.41	3.22	3.07	3.48
Postpartum depression	2.61	2.46	2.37	2.23	2.14	1.99	2.30
Obstetric hemorrhage	3.34	3.19	3.00	2.86	2.67	2.52	2.93
Incontinence	3.49	3.34	3.15	3.01	2.82	2.67	3.08
Pregnancy related infection	4.20	4.18	4.16	4.13	4.08	3.98	4.12
Vomiting sensation	4.18	4.07	3.86	3.72	3.53	3.38	3.79
Obesity	4.22	4.20	4.18	4.17	4.16	4.12	4.18
Embolism	3.58	3.43	3.24	3.10	2.91	2.76	3.17
Average	3.50	3.37	3.23	3.10	2.95	2.81	3.16

Source: Computed from the primary data

ANOVA

Source of Variation	SS	df	MS	F	F crit
Variation due to maternal health problems	55.33958	21	2.635218	354.0226	1.65744
Variation due to villages	7.396334	5	1.479267	198.7289	2.300888
Error	0.781583	105	0.007444		
Total	63.51749	131			

The Sedapatti village women respondents' occupy the fourth position in their overall rated maternal health problems during pregnancy as per their secured a mean score of 3.10 on a 5 point rating scale. The Usilampatti village women respondents' hold the fifth position in their overall rated maternal health problems during pregnancy as per their secured a mean score of 2.95 on a 5 point rating scale. The Kottampatti village women respondents come down to last position in their overall rated maternal health problems during pregnancy as per their secured a mean score of 2.81 on a 5 point rating scale.

The anova two way model is applied for further discussion. The computed anova value 354.02 is greater than its tabulated value at 5 percent level significance. Hence, the variation among the maternal health problems during pregnancy is statistically identified as significant. In another point, the computed anova value 198.72 is greater than its tabulated value at 5 percent level significance. Hence, the variation among the village groups is statistically identified as significant as per the women respondents expressed maternal health problems during pregnancy.

Table 3 Income Wise Women Respondents' Rating on Maternal Health Problems

Variables	Below Rs.3,000	Rs.3,000- 6,000	Rs.6,000- 9,000	Rs.9,000- 12,000	Above Rs.12,000	Mean
Severe headache	3.07	2.84	2.51	2.33	2.25	2.60
Blued vision	2.47	2.34	2.01	1.88	1.80	2.10
Respiratory difficult	2.90	2.67	2.34	2.16	2.08	2.43
Fever	4.21	4.13	4.00	3.87	3.74	3.99
Severe abdominal pain	3.21	2.98	2.65	2.47	2.39	2.74
Vaginal bleeding	3.84	3.61	3.28	3.10	3.02	3.37
Less movement of the fetus	3.48	3.25	2.92	2.74	2.66	3.01
Convulsion	4.14	4.11	3.88	3.70	3.52	3.87
Foul smelling discharge from vagina	3.75	3.52	3.19	3.01	2.93	3.28
Maternal depression	4.10	3.87	3.54	3.36	3.28	3.63
Excessive fatigue	2.69	2.46	2.13	1.95	1.87	2.22
Survelling of the legs	4.20	4.19	4.12	3.90	3.80	4.05
Obstructed labour	2.99	2.76	2.43	2.25	2.17	2.52
Obstetric fistula	3.14	2.91	2.58	2.40	2.32	2.67
Anemia	3.95	3.72	3.39	3.21	3.13	3.48
Postpartum depression	2.77	2.54	2.21	2.03	1.95	2.30
Obstetric hemorrhage	3.40	3.17	2.84	2.66	2.58	2.93
Incontinence	3.55	3.32	2.99	2.81	2.73	3.08
Pregnancy related infection	4.20	4.19	4.16	4.06	3.97	4.12
Vomiting sensation	4.26	4.03	3.70	3.52	3.44	3.79
Obesity	4.21	4.20	4.19	4.17	4.13	4.18
Embolism	3.64	3.41	3.08	2.90	2.82	3.17
Average	3.55	3.37	3.10	2.93	2.84	3.16

Source: Computed from the primary data

ANOVA

Source of Variation	SS	df	MS	F	F crit
Variation due to maternal health problems	46.0263	21	2.191729	224.7787	1.683053
Variation due to income status	7.835549	4	1.958887	200.899	2.480322
Error	0.819051	84	0.009751		
Total	54.6809	109			

Data presented in table 3 indicate the income wise women respondents' rating on maternal health problems during pregnancy. The lowest income group women respondents' rank the first position in their overall rated maternal health problems during pregnancy as per their secured a mean score of 3.55 on a 5 point rating scale. The women respondents' belong to the income group Rs.3,000-6,000 record the second position in their overall rated maternal health problems during pregnancy as per their secured a mean score of 3.37 on a 5 point rating scale. The women respondents come under the income in the group in

the range of Rs.6,000-9,000 register the third position in their overall rated maternal health problems during pregnancy as per their secured mean score of 3.10 on a 5 point rating scale. The women respondents belong to the income group in the range of Rs.9,000-12,000 occupy the fourth position in their overall expressed maternal health problems during pregnancy as per their secured a mean score of 2.93 on a 5 point rating scale. The highest income group women respondents come down to the last position in their overall rated maternal health problems during pregnancy as per their secured a mean score of 2.84 on a 5 point rating scale.

The anova two ways model is applied for further discussion. The computed anova value 224.77 is greater than its tabulated value at 5 percent level significance. Hence, the variation among the maternal health problems during pregnancy is statistically identified as significant.

In another point, the computed anova value 200.89 is greater than its tabulated value at 5 percent level significance. Hence, the variation among the income groups is statistically identified as significant as per the women respondents received maternal health problems during pregnancy.

Table 4 Occupation Wise Women Respondents' Rating on Maternal Health Problems

Variables	Agriculture labour	Agriculture	Private employees	Business	Mean
Severe headache	2.93	2.72	2.48	2.27	2.60
Blued vision	2.33	2.11	2.03	1.92	2.10
Respiratory difficult	2.76	2.55	2.31	2.10	2.43
Fever	4.12	4.01	3.97	3.76	3.99
Severe abdominal pain	3.07	2.86	2.62	2.41	2.74
Vaginal bleeding	3.70	3.49	3.25	3.04	3.37
Less movement of the fetus	3.34	3.13	2.89	2.68	3.01
Convulsion	4.20	3.99	3.75	3.54	3.87
Foul smelling discharge from vagina	3.61	3.40	3.16	2.95	3.28
Maternal depression	3.96	3.75	3.51	3.30	3.63
Excessive fatigue	2.55	2.34	2.10	1.89	2.22
Survelling of the legs	4.20	4.17	4.03	3.80	4.05
Obstructed labour	2.85	2.64	2.40	2.19	2.52
Obstetric fistula	3.00	2.79	2.55	2.34	2.67
Anemia	3.81	3.60	3.36	3.15	3.48
Postpartum depression	2.63	2.42	2.18	1.97	2.30
Obstetric hemorrhage	3.26	3.05	2.81	2.60	2.93
Incontinence	3.41	3.20	2.96	2.75	3.08
Pregnancy related infection	4.25	4.15	4.10	3.99	4.12
Vomiting sensation	4.12	3.91	3.67	3.46	3.79
Obesity	4.21	4.20	4.18	4.13	4.18
Embolism	3.50	3.29	3.05	2.84	3.17
Average	3.45	3.26	3.06	2.87	3.16

Source: Computed from the primary data

ANOVA

Source of Variation	SS	df	MS	F	F crit
Variation due to maternal health problems	36.78531	21	1.751681	303.5319	1.725969
Variation due to occupational status	4.125677	3	1.375226	238.2996	2.750541
Error	0.363573	63	0.005771		
Total	41.27456	87			

Table 4 presents data on the occupation wise women respondents' rating on maternal health awareness during pregnancy. The agriculture wage labour group women respondents hold the first position in their overall rated health problems during the time of pregnancy and it is evident from their secured a mean score of 3.45 on a 5 point rating scale. The agriculture group women respondents

occupy the second position in their overall rated maternal health problems during the time of pregnancy and it is evident from their secured a mean score of 3.26 on a 5 point rating scale.

The private employee group women respondents register the third position in their overall rated maternal health problems during the time of pregnancy and it is evident from their secured a

mean score of 3.06 on a 5 point rating scale. The business group women respondents come down to the last position in their overall rated maternal health problems during the time of pregnancy and it is evident from their secured a mean score of 2.87 on a 5 point rating scale.

The anova two way model is applied for further discussion. At one point the computed anova value 303.53 is greater than its tabulated value at 5 per cent level significance. Hence the variation among the maternal health problems during the time of pregnancy is 238.29 is greater than its

tabulated value at 5 per cent level significance. Hence the variation among occupational groups is statistically identified as significant as per the rating of the respondents’.

Table 5 presents data on the education wise women respondents’ rating on maternal health problems during the time of pregnancy. The primary level educated women respondents register the first position in their overall rated maternal health problems during the time of pregnancy and it is evident from their secured a mean score of 3.37 on a 5 point rating scale.

Table 5 Education Wise Women Respondents’ Rating on Maternal Health Problems

Variables	Primary	Upper primary	Secondary	Degree	Mean
Severe headache	2.85	2.66	2.53	2.36	2.60
Blued vision	2.25	2.05	2.08	2.01	2.10
Respiratory difficult	2.68	2.49	2.36	2.19	2.43
Fever	4.10	4.07	3.84	3.85	3.99
Severe abdominal pain	2.99	2.80	2.67	2.50	2.74
Vaginal bleeding	3.62	3.43	3.30	3.13	3.37
Less movement of the fetus	3.26	3.07	2.94	2.77	3.01
Convulsion	4.12	3.93	3.80	3.63	3.87
Foul smelling discharge from vagina	3.53	3.34	3.21	3.04	3.28
Maternal depression	3.88	3.69	3.56	3.39	3.63
Excessive fatigue	2.47	2.28	2.15	1.98	2.22
Survelling of the legs	4.12	4.14	4.05	3.89	4.05
Obstructed labour	2.77	2.58	2.45	2.28	2.52
Obstetric fistula	2.92	2.73	2.60	2.43	2.67
Anemia	3.73	3.54	3.41	3.24	3.48
Postpartum depression	2.55	2.36	2.23	2.06	2.30
Obstetric hemorrhage	3.18	2.99	2.86	2.69	2.93
Incontinence	3.33	3.14	3.01	2.84	3.08
Pregnancy related infection	4.20	4.21	4.12	4.01	4.12
Vomiting sensation	4.04	3.85	3.72	3.55	3.79
Obesity	4.22	4.22	4.14	4.12	4.18
Embolism	3.42	3.23	3.10	2.93	3.17
Average	3.37	3.22	3.10	2.95	3.16

Source: Computed from the primary data

ANOVA

Source of Variation	SS	df	MS	F	F crit
Variation due to maternal health problems	36.84151	21	1.754358	538.3116	1.725969
Variation due to educational level	2.145058	3	0.715019	219.3983	2.750541
Error	0.205317	63	0.003259		
Total	39.19189	87			

The upper primary level educated women respondents record the second position in their overall rated maternal health problems during the time of pregnancy and it is evident from their secured a mean score of 3.22 on a 5 point rating scale. The secondary level educated women respondents record the third position in their overall rated maternal health problems during pregnancy and it is evident from their secured a mean score of 3.10 on a 5 point rating scale. The degree level educated women respondents come down to the last position in their overall rated maternal health problems during the time of pregnancy and it is evident from their secured a mean score of 2.95 on a 5 point rating scale.

The anova two way model is applied for further discussion. At one point the computed anova value 538.31 is greater than its tabulated value at 5 per cent level significance. Hence the variation among the maternal health problems during the time of pregnancy is statistically identified as significant. In another point, the computed anova value 219.39 is greater than its tabulated value at 5 per cent level significance. Hence the variation among educational groups is statistically identified as significant as per the rating of the respondents’.

CONCLUSION

It could be seen clearly from the above discussion that the women respondents have realized the high level maternal health problems by citing the indicators of obesity, pregnancy related infection, survelling of the legs, fever, convulsion, vomiting sensation and Maternal depression as per their secured a mean score above 3.50 on a 5 point rating scale. The women respondents have reported the moderate level maternal health problems by citing the indicators of occurrence of anemia, vaginal bleeding, foul smelling discharge from vagina, embolism, incontinence, less movement of the fetus, obstetric hemorrhage, severe abdominal pain, obstetric fistula, severe headache and obstructed labour as per their secured a mean score in the range of 2.5 to 3.5 on a 5 point rating scale. The women respondents have reported the low level maternal health problems by citing the indicators of respiratory difficult, postpartum depression,

excessive fatigue and blued vision as per their secured means score below 2.5 on 5 point rating scale. The non self help group women respondents rank the first position in their overall rated maternal health problems during the time of pregnancy and the self help group women respondents lag behind them.

The result of village wise analysis reveals that the Alanganallur village women respondents’ rank the first position in their overall rated maternal health problems during pregnancy, Vadipatti village women respondents’ the second, Melur village women respondents’ the third, Sedapatti village women respondents’ the fourth, Usilampatti village women respondents’ the fifth and Kottampatti village women respondents the last. The result of income wise analysis reveals that the women respondents belong to lowest income group rank the first position in their overall rated maternal health problems during pregnancy, women respondents come under the household income group Rs.3,000-6,000 the second, women respondents belong to household income group Rs.6,000-9,000 the third, women respondents included in the household income group Rs.9,000-12,000 the fourth and the highest income group women respondents the last. The result of occupation wise analysis reveals that the agriculture wage labour group women respondents rank the first position in their overall rated maternal health problems during the time of pregnancy, agriculture group women respondents the second, private employee group women respondents the third and business group women respondents the last. The result of education wise analysis reveals that the primary level educated women respondents rank the first position in their overall rated maternal health problems during the time of pregnancy, upper primary level educated women respondents the second, secondary level educated women respondents the third and degree level educated women respondents the last.

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