

Towards Universalisation of Maternity Entitlements

An Exploratory Case Study of the Dr. Muthulakshmi Maternity Assistance Scheme, Tamil Nadu

Public Health Resource Network
M.S. Swaminathan Research Foundation
Tamil Nadu – Forum for Crèche and Child Care Services

Dr Vandana Prasad
PHRN

Objectives

- To trace the history and developments in maternity entitlements; concepts and delivery through a review of literature
- Analyse the current implementation of DMMAS scheme vis a vis its own objectives as well as the currently accepted objectives of maternity entitlements
- Make recommendations for better implementation of the DMMAS as well as for the proposed IGMSY on the basis of the study

Conceptual Issues

- Women's labour right; protection of employment and support during pregnancy, delivery and lactation
- Impact on maternal morbidity and mortality
- Impact on birth weight
- Impact on exclusive breastfeeding and thus on neonatal and infant mortality, growth and development

Indian Benchmark; Recommendations Sixth Pay Commission

- The existing ceiling of 135 days **Maternity Leave** provided in Rule 43(1) of Central Civil Services (Leave) Rules, 1972 shall be enhanced to 180 days
- Leave of the kind due and admissible (including commuted leave for a period not exceeding 60 days and leave not due) that can be granted in continuation with **Maternity Leave** provided in Rule 43(4)(b) shall be increased to 2 years
- Women employees having minor children may be granted **Child Care Leave** by an authority competent to grant leave, for a maximum period of two years (i.e. 730 days) during their entire service for taking care of upto two children whether for rearing or to look after any of their needs like examination, sickness etc.. During the period of such leave, the women employees shall be paid leave salary equal to the pay drawn immediately before proceeding on leave. It may be availed of in more than one spell. Child Care Leave shall not be debited against the leave account

Current Inequities

- Applicable to a very small number of women
- Back of envelope costs for child care leave about Rs 12 lakhs per woman employee
- As against zero financial entitlements for over 90% women working in the informal sector

DMMAS Objectives

- Financial assistance of Rs. 3000 before delivery and Rs. 3000 after delivery for two deliveries
- Compensate loss of income during 'delivery' period and for consuming nutritious diet so they give birth to a healthy child

IGMSY Objectives

- Promoting appropriate practices, care and service utilisation during pregnancy, safe delivery and lactation (JSY??)
- Encouraging the women to follow (optimal) Infant and Young Child Feeding (IYCF) practices including early and exclusive breast feeding for six months
- Contributing to better enabling environment by providing cash incentives (? Wage compensation) for improved health and nutrition to pregnant and nursing mothers

The DMMAS Field Study

Methodology

- **Secondary data** – census, surveys, reports on previous studies
- **Primary data** collected in Dharmapuri (last rank) and Kancheepuram (second rank) district of Tamil Nadu; worse off and better off districts; rural and urban areas
 1. Mothers who received financial assistance from DMMAAS
 2. Village Health Nurses (VHN) / Auxiliary Nurse Midwife (ANM)
 3. Anganwadi Workers (AWWs)
- **Sampling:** Convenience, snowballing
- **Tools used:** Interview Schedule, Focus Group Discussion (FGD)

Respondents

Respondents	Dharmapuri		Kancheepuram		Total
	Rural	Urban	Rural	Urban	
Mothers	54	50	53	50	207
VHN/ANM	9	8	8	7	32
AWW	8	10	8	7	33

Inclusion and Exclusion

- Though BPL is used by functionaries for identification of mothers, the scheme offers greater universality and is not limited to the BPL framework (46% of all live births, 2008-09)
- A large number of women who received benefits were SC /ST / MBC/ BC (30%, 1%, 44%, 24%)
- Unwritten targets for family planning still persist (3 women) as well as two child norm in policy
- Study did not include any eligible woman who was excluded from the scheme; beyond its scope
- It is not known whether a woman delivering at home would be considered eligible or not

Utilisation of Entitlement Money

- Most women used money for medical expenses, buying food and savings
- 58 percent mention medical expenses as one of the items they spend money on; 44 percent mentioned food and 35 percent mentioned savings
- This medical expenditure is despite the fact that all delivered in government institutions

Discussion

- Adherence to Concept
- Inclusion and Exclusion
- Utilisation of Entitlement Money
- Delays
- Leakages
- Training and Capacity Building
- Exclusive Breastfeeding
- Contribution of Other Village Level Functionaries
- Wage Compensation
- Urban-Rural Differences
- Convergence with ICDS

Adherence to Concept

- Stated objectives of DMMAS – *Wage compensation during delivery and nutritional support* to pregnant women
- Important issues of *Child care* and *Exclusive breastfeeding* are not specifically related to the scheme

Delays

- None received money during pregnancy so no influence upon nutrition and LBW
- 86 percent received money within first six months of delivery out of which only 22 percent received the money in the first month
- 14 percent received the money within 7 months to one years time

Leakages

- Study hardly found any evidence of corruption or leakages
- 94 percent did not face any difficulty in getting the money. 87 percent got the money in the first instalment
- No major problems were perceived with getting bank accounts

Training and Capacity Building

- Lack of focus to link cash compensation with objectives
- Training was given only on procedural elements
- No specific training on the technical issues specially exclusive breastfeeding
- Most providers reported having advised the women to eat nutritious food and to breastfeed. Only 2 VHNs and 3 AWWs linked exclusive breastfeeding with the scheme while advising mothers

Exclusive Breastfeeding Cont.

- Out of the total respondents 28 women had children below 6 months and 6 out of them had given up breastfeeding altogether
- Out of 182 women who were giving other food, 145 i.e. 80 % started other food after six months. This was self-reported by women and there was no further probing. We can assume that these women mostly breast fed till six months
- Caveat – no one understands 'exclusive'. This data probably valid for 'mostly' breastfeeding, not exclusive breastfeeding

Contribution of Other Village Level Functionaries

- Even though VHNs/ANMs administer the scheme, the study showed that AWW played a significant role in identifying potential mothers who would benefit and they felt they could play an important role in implementing the scheme
- AWW also interacted with the women on how to utilise the entitlement money
- ASHA can also play a role
- In case the delivery is incentivised, roles will have to be clearly demarcated

Wage Compensation

- Most respondents were not in the formal wage market (only 12 percent in paid work). They were young (72 percent between 18-25 years) with 57 percent who had one child. The study was therefore unable to capture whether the scheme's objective of wage compensation for pregnant women in formal labour market was being achieved
- All women contribute economically to the survival of the family through paid or unpaid work
- 'Mostly breastfeeding' even without specific counselling may relate to the support of the scheme

Urban-Rural Differences

- Profile of respondents was not very different apart from higher number of MBCs in rural areas
- In terms of scheme delivery, urban areas seem far poorer
- 69 percent of the women who were not told what the scheme was for were from urban areas
- The few who faced difficulty in applying for the scheme and getting the money were all from urban areas
- There are no significant differences between the better-off and worse-off districts

Convergence with the ICDS

- Incidental findings of the study shows that supplementary nutrition programme (SNP) through ICDS is working well
- DMMAS has not supplanted use of supplementary nutrition programme; most women continue to avail

Recommendations from the Study

- Objectives of maternal entitlements should be clear and consistent with current concept
- Universality is desirable and achievable and should not be compromised by adding conditionalities not related to the concept of maternity entitlements (institutional delivery etc)
- Wage compensation should be adequate and equitable (6th Pay Commission)
- Good implementation should be commensurate with objectives

Recommendations Contd.

- capacity building for purpose of the scheme; linking it to EBF and wage compensation
- prevention of delays
- Use of bank accounts is appropriate
- Convergence with AWW/ICDS along with health workers may be better than ANM / VHN delivered scheme
- Special attention for urban poor
- Health care services should be made free and available to all so that money is spent on nutrition and not on seeking health care

Areas for Further Research

- Impact, specially in worse off states
 - EBF
 - LBW
 - Days off work
 - IMR
- Exclusions and bottlenecks for inclusion
- Any new scheme should have a built-in review to look at issues of capacity and delivery mechanisms to achieve objectives
- Developing methodology for assessing exclusive breastfeeding

Thank You

