

Impact Of Sensitization Programme On Utilization And Hindering Factors Related To Abpmjay (Ayushman Bharat Pradhan Mantri Jan Arogya Yojana) Cards Among Rural People Residing At Selected Villages Of Vijayapura District

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Abstract

Background and Objectives: India takes great efforts towards providing affordable and easily accessible health care services to the common man of Indian citizen with the launch of AB-PMJAY scheme by the Resp. PM Shri. Narendra Modi on 2nd March 2018. This scheme is implemented under the vision that, every citizen should receive his due share of health care. An inspirational level is taken by the government through AB-PMJAY. This one is "world's largest government funded program" which one is targeting more than **50 core** beneficiaries throughout India. A nurse research found that rural populations are having less information related to the AB-PMJAY scheme and its utilization in concerned health care facilities both public and private sector. Even they are facing so many hindering factors for availing of AB-PMJAY Cards. That's why the research strongly felt the need to do more investigations to find out impact of sensitization program on utilization and hindering factors related to AB-PMJAY cards.

Methods: A quantitative evaluative research approach with research design of Pre-Experimental one group pre-test design was adopted for study. **165** samples selected from rural areas of Vijayapura by Non-Probability purposive sampling technique at Primary Health Centers, Babaleshwar. A semi structured survey questionnaire was used to assess the Utilization and Hindering Factors and sensitization programmes was administered to find its effectiveness. The collected data was analyzed by using descriptive & inferential statistics.

Results: It was observed that majority **74(44.8%)** of the study participants were between **39-49** years of age, **52(31.5%)** were had no formal educational status, **102(61.8%)** of the study participants were Hindu, **51(30.9%)** were had monthly income of 10,001-10,500/-, **87(52.7%)** were had 5-6 family members, **136(82.4%)** were had BPL ration cards, **56(33.9%)** were got information regarding ABPMJAY from their relatives, **89(53.9%)** study participants were not registered under the scheme, **65(39.4%)** were only 2 of family members are registered under ABPMJAY, **133(80.6%)** were not suffering with chronic disorders, **25(78.1%)** of study participants were not using ABPMJAY cards of their chronic diseases.

It was seen that mean post test utilization score (**88.38**) was considerably higher in comparison with mean pre test utilization score (**43.17**) among rural people.

It was seen that mean pre test hindering factors score was (**69.03**) was considerably higher in comparison with mean post test hindering factors score (**52.35**) among the rural people. Mean paired difference in pretest and post test utilization score was (**45.21**) with *t-value* = **76.5** and hindering factors score was (**16.68**) with *t-value* = **46.34** with both of them *p-value* less than **0.0001** indicates that sensitization program was effective in improving the utilization ABPMJAY cards and also in reducing the hindering factors of in availing of ABPMJAY card among the rural people.

The data revealed that there was high association between utilization and hindering factors regarding ABPMJAY cards with *Chi-Square value* = **12.63** and *p-value* = **0.002**.

Interpretation & Conclusion

The findings of this study showed that the sensitization program were effective as evidenced by the results and proved that the sensitization program among the rural people plays important role in improving the utilization of scheme and reducing hindering factors in availing of AB-PMJAY cards among them.

Key words: AB-PMJAY cards, Sensitization Program, Utilization and Hindering Factors.

INTRODUCTION

The health sector is amongst the largest and fastest growing sectors, expected to reach US\$280 billion by 2025. At the same time, India's health sector faces immense challenges which are characterized by high pocket expenditure, low financial protection, low health insurance coverage among the rural and urban population and 62.58% of our population has to pay their own health and hospitalization expenses are not covered through any form of health protection. "Ayushman Bharat" or "Healthy India" is a national initiative launched by Prime Minister Shri. Narendra Modi as the part of National Health policy-2017, in order to achieve the vision of Universal Health Coverage (UHC).

Benefits under this scheme includes the coverage of up to Rs. 5 Lacks per Family per year, for secondary and tertiary care hospitalization and provide cashless and paperless access to services for the beneficiary at the point of services wherever the individuals want to take health care packages. So the entitled families will be able to use the quality services that they need without facing any financial hardship and it also reduce catastrophic expenditures of families for hospitalization.

NEED FOR STUDY

India is one of the developing countries in the world having 1.3 billion population, of which 66% of population resides in rural area and 34% resides in urban area. According to National Health Profile (NHP), released the latest data that an increases in health care expenditure in India since 2019. As per Organization for Economic Co-Operation and Development (OECD), India's healthcare spending its 3.6% of GDP. According to Indian Consumer Economy (ICE), 360 surveys the average medical expenditure In India is about Rs. 9,373. In 2014 WHO health profile report highlights the issue of high out of pocket expenditure on healthcare in India and its impact on the population. These all above factors indicates that a considerable number of individuals and families are financially burdened by healthcare costs, potentially leading to decline in their economic well-being.

STATEMENT OF THE STUDY

"Impact of Sensitization Programme on Utilization and Hindering Factors related to ABPMJAY (Ayushman Bharat Pradhan Mantri Jan Arogya Yojana) cards among rural people residing at selected villages of Vijayapura District."

OBJECTIVES OF THE STUDY

1. To assess the utilization of AB-PMJAY cards among the rural people.
2. To assess the hindering factors of getting ABPMJAY cards among the rural people
3. To find the impact of sensitization program on AB-PMJAY cards among the rural people.
4. To determine the association between utilization and hindering factors about ABPMJAY cards.
5. To find the association between utilization and hindering factors of ABPMJAY cards with their selected demographic variables.

OPERATIONAL DEFINITIONS

- **Impact:** It refers to a significant gain in awareness about utilization and overcoming of hindering factors with view of using ABPMJAY cards among the rural people.
- **Sensitization Programme:** It refers to the series of individual interaction performed for 10-15 min's with interval of 15 day's having minimum of 3 interaction performed by the investigator with people at rural area, contains the eligibility to avail the card, benefits and coverage and also how to overcome with hindering factors for best utilization of ABPMJAY cards.
- **Utilization:** A series of oral responses expressed in relation to use of ABPMJAY cards whenever they are in need, which in recorded through Likert Scale.
- **Hindering factors:** A series of oral responses expressed in relation to factors (physical, economical and psychological) affected in delay in getting and availing healthcare services by use of ABPMJAY cards, which is recorded through Likert Scale.
- **ABPMJAY (Ayushman Bharat Pradhan Mantri Jan Arogya Yojana):** It refers to the national public health insurance scheme introduced by government of India for people with APL & BPL in view of utilizing free health insurance coverage for their health.

HYPOTHESES

H₁: The mean posttest utilization scores will be significantly higher than mean pretest score among rural people regarding ABPMJAY cards.

H₂: The mean pretest hindering factors scores will be significantly higher than mean posttest score among rural people regarding ABPMJAY cards.

H₃: There will be significant association between utilization and hindering factors related to ABPMJAY cards among rural people.

H₄: There will be significant association between utilization and hindering factors related to ABPMJAY cards with selected demographic variables.

REVIEW OF LITERATURE

The review of literature is systematic selection of source work. The literature relevant to this study was reviewed and arranged in the following sections.

- Studies related to Knowledge regarding AB-PMJAY & AB-ARK.
- Studies related to the attitude towards Utilization of AB-PMJAY Scheme.

A cross sectional study assessed awareness and utilization of the Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (ABPMJAY) in Chamarajanagar Taluka, involving 1,027 randomly selected respondents. Among them, 452(44%) were cardholders, with 434(96%) categorized as Below Poverty Lines(BPL) and primarily residing in rural areas(60%). The study revealed that 65% of participants were aware of the schemes, but only 3% of cardholders utilized its benefits. This awareness level was lower than 80% found in a previous survey in Tamil Nadu. Researchers concluded that inadequate awareness and poor communication from health workers significantly hindered effective utilization of the scheme among the study population.

METHODOLOGY

- **RESEARCH APPROACH:** Quantitative research approach.
- **RESEARCH DESIGN:** Pre-experimental one group pretest and posttest research design.
- **STUDY SETTING:** Selected rural peoples of Vijayapur.

VARIABLES

- ❖ **DEPENDENT VARIABLE:** Utilization and Hindering factors related to ABPMJAY cards.
- ❖ **INDEPENDENT VARIABLE:** Sensitization on ABPMJAY cards.
- ❖ **DEMOGRAPHIC VARIABLES:** Age, Education, Religion, Socio-economic status, Type of Ration card, Sources of Information regarding ABPMJAY cards, Registration under ABPMJAY, Any family member suffering with chronic disorder and card is used for their treatment.

POPULATION

- ❖ **STUDY POPULATION:** Rural household owners of Vijayapur.
- ❖ **SAMPLE SIZE:** Sample comprises 165 household owners from selected rural area of Vijayapura.
- ❖ **SAMPLING TECHNIQUE:** Purposive sampling technique was used.

SAMPLE SELECTION CRITERIA

INCLUSION CRITERIA:

- Not availing the benefits of ABPMJAY cards.
- Willing to participate in the study.
- Can read, write and understand Kannada or English.

EXCLUSION CRITERIA:

- Already availing the benefits of ABPMJAY cards.
- Cannot Read, Write and understand kannada or English.

ETHICAL CONSIDERATION

Prior permission was obtained from the research committee and informed consent was obtained from the participants.

DESCRIPTION OF THE TOOL

Development of the tool:

- ❖ The following steps were carried out in preparing the tool
- ❖ Literature review
- ❖ Preparation of the blue print
- ❖ Consultation with the guide, statistician, subject experts of nursing
- ❖ Establishment of validity and reliability.

The tool used in this study consists of Two Sections

- **SECTION - I : Consists of Socio Demographic Variables**

It consists of 12 items to obtain information regarding Age ,Religion ,Educational status, Type of Ration card, Socio-economic status, Total number of family members, Registration under the scheme, Source of information regarding ABPMJAY cards and so on.

➤ **SECTION - II : It includes PART (A) and PART (B)**

PART (A): A likert scale consists of semi structured survey questionnaires to assess the knowledge related to utilization of ABPMJAY card.

PART (B): A likert scale consists of semi structured survey questionnaires to assess the knowledge related to hindering factors in availing of ABPMJAY card.

➤ **SCORING CATEGORIZATION**

1-20	STRONGLY DISAGREE
21-40	DISAGREE
41-60	NEUTRAL
61-80	AGREE
81-100	STRONGLY AGREE

RESULTS

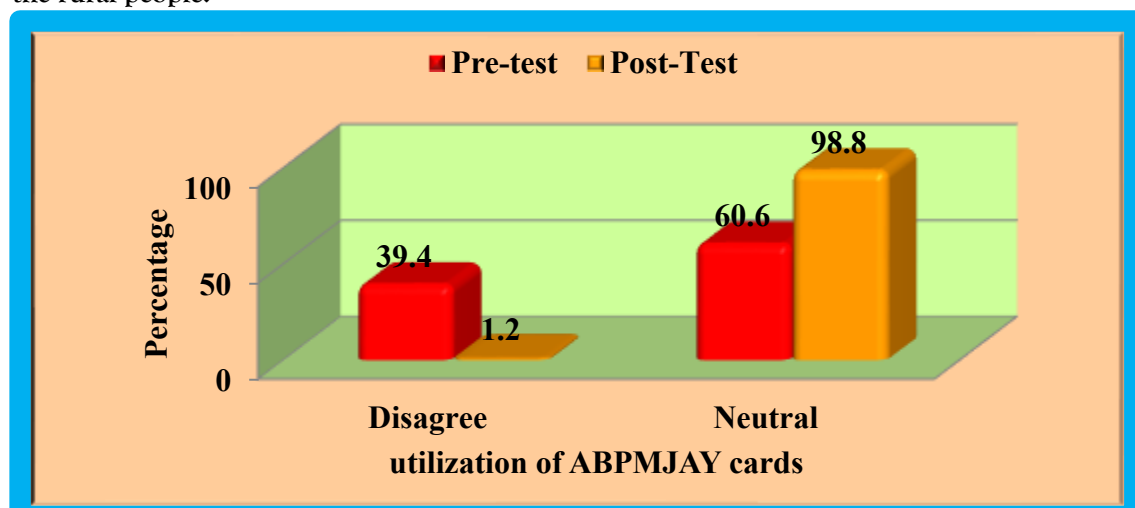
The findings were presented under the following headings:

Section I: Analysis of demographic characteristics of respondents under study.

Socio- Demographic Characteristics		Frequency	Percentage
Age	29-39	30	18.2
	39-49	74	44.8
	49-59	46	27.9
	59-69	15	9.1
	Total	165	100.0
Education	Non Formal	52	31.5
	Primary	47	28.5
	High School	30	18.2
	Pre-University	21	12.7
	Degree & Above	15	9.1
	Total	165	100.0
Religion	Hindu	102	61.8
	Muslim	63	38.2
	Total	165	100.0
SES (socio-economic status)	5000-10000	49	29.7
	10001-1050	51	30.9
	10501-20000	48	29.1
	> 20000	17	10.3
	Total	165	100.0
Family Members	1-2	06	3.6
	3-4	56	33.9
	5-6	87	52.7
	Above 6	16	9.7
	Total	165	100.0
Ration Card	BPL	136	82.4
	APL	27	16.4
	No Card	02	1.2
	Total	165	100.0
source	Friends	37	22.4
	Relative	56	33.9
	Health Personnel	34	20.6
	Mass Media	38	23.0
	Total	165	100.0

Registered under ABPMJAY	Yes	76	46.1
	No	89	53.9
	Total	165	100.0
Reason for not registered under ABPMJAY	Lack of awareness and documents	1	0.6
	Lack of time and registration centers	2	1.2
	Lack of awareness and registration centers	1	0.6
	Lack of awareness	13	7.9
	Aadhar card not updated	11	6.7
	Lack of registration centers	6	3.6
	Mobile number not linked with aadhar	18	10.9
	No proper documents	12	7.3
	Biometric not matched	9	5.5
	No faith in free services	2	1.2
	Lack of time	6	3.6
	Difficulty in registration	1	0.6
	Name missing in ration card	3	1.8
	Time consuming	4	2.4
	Total	89	100.0
Family members are registered under this ABPMJAY	0	4	2.4
	1.00	25	15.2
	2.00	65	39.4
	3.00	40	24.2
	4.00	27	16.4
	5.00	4	2.4
	Total	165	100.0
Family member is suffering with chronic diseases	Yes	32	19.4
	No	133	80.6
	Total	165	100.0
Used the ABPMJAY Card for their treatment?	Yes	7	21.8
	No	25	78.1
	Total	32	100.0

Section II: Comparison of utilization of ABPMJAY cards before and after sensitization level among the rural people.



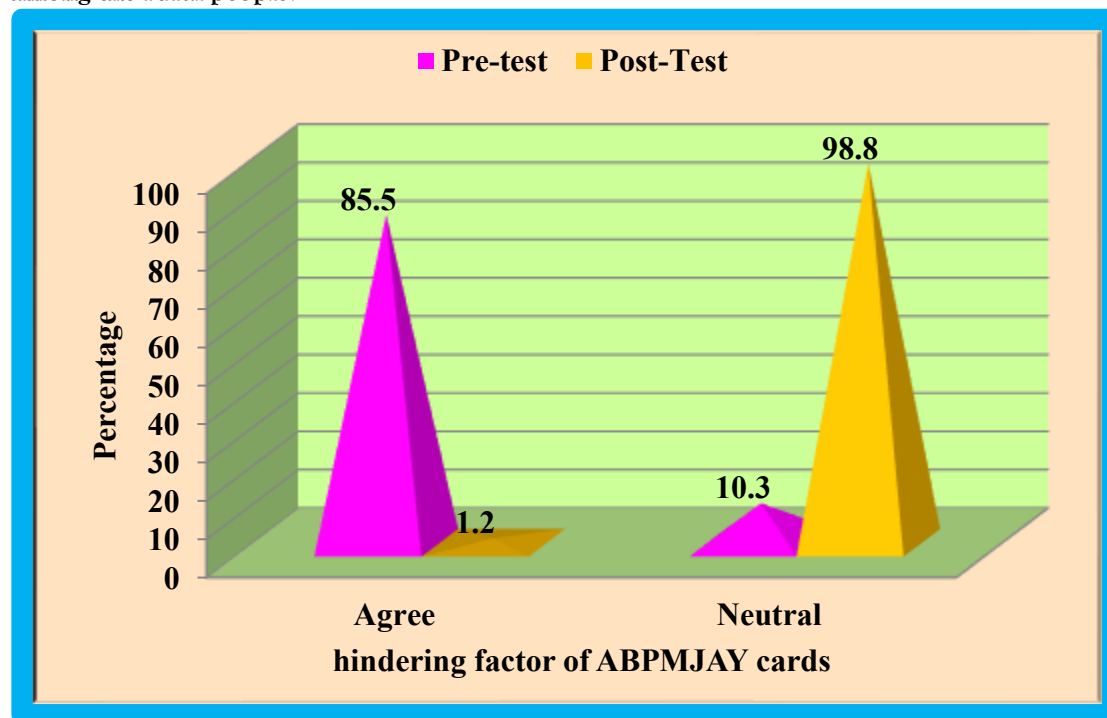
It was seen that, utilization of ABPMJAY cards pretest score was 39.4% for disagree and 60.6% for neutral, whereas in post test was 1.2% for disagree and 98.8% for neutral among rural people.

Analysis of effectiveness of sensitization program on utilization of ABPMJAY card among rural people.
Comparison overall mean pre-test and post test score of the rural people regarding Utilization of ABPMJAY Cards

Utilization Score	Mean	N	Std. Deviation	Std. Error Mean	P-value
Pretest	43.17	165	6.94	0.54	< 0.0001(S)
Posttest	88.38	165	3.43	0.26	

It was seen that mean post test score was (88.38) was considerably higher in comparison with mean pre-test score (43.17) with mean paired difference was (45.21) with t-value = 76.5 with p-value less than 0.0001 indicates that sensitization program was effective in improving the utilization of ABPMJAY cards among rural people.

Section III: Comparison of hindering factor of ABPMJAY cards before and after sensitization level among the rural people.



it was seen that, hindering factors of ABPMJAY cards pretest score was 85.5% for agree and 10.3% for neutral, whereas in post test score was 1.2% for agree and 98.8% for neutral among rural people.

Analysis of effectiveness of sensitization program on hindering factors of getting ABPMJAY card among rural people.

Comparison overall mean pre-test and post test score of the rural people regarding Hindering Factors of ABPMJAY Cards

Hindering factors Score	Mean	N	Std. Deviation	Std. Error Mean	P-value
Pretest	69.03	165	6.89	0.53	< 0.0001(S)
Posttest	52.35	165	4.01	0.31	

It was seen that mean pre test score was (69.03) was considerably higher in comparison with mean post-test score (52.35) with mean paired difference was (16.68) with t-value = 46.34 with p-value less than

0.0001 indicates that sensitization program was effective in reducing the hindering factors of ABPMJAY cards among the rural people.

Section IV: Analysis of association between utilization and hindering factors related to ABPMJAY card among rural people.

Association between utilization and hindering factors about ABPMJAY Cards

Utilization	Hindering			Chi-square	df	P-value
	Agree	Neutral	Strongly Agree			
Disagree	54	4	7	12.63	2	0.002(S)
Neutral	87	13	0			

It was revealed that, there was high association between utilization and hindering factors regarding ABPMJAY cards with chi-square value = 12.63 and p-value = 0.002.

SECTION V: Analysis of association between utilization and hindering factors of AB-PMJAY cards with their respective socio demographic variables

The study results revealed that there was no association between utilization and hindering factors of ABPMJAY Cards with their selected demographic variables such as age, education religion, SES, total family members, ration cards, source, Are you registered under ABPMJAY?, and reason, family members are registered under this ABPMJAY , Any family member is suffering with chronic diseases and have they used the ABPMJAY Card for their treatment with higher chi-square p-value more than 0.05.

IMPLICATIONS

The findings can be used as follows:

Nursing practice:

- **Quality Improvement:** Findings can identify area for improvement in care delivery, leading to the adoption of best practices and enhanced patient outcomes.
- **Resource Allocation:** Data on services utilization and patient needs can guide more effective allocation of resources, ensuring that nursing staff and facilities are adequately equipped.
- **Patient Management:** Insights into patient's demographics and insurance claims can help tailor nursing services to meet the specific needs of different patient groups.

Nursing Education:

- **Curriculum Development:** Findings can inform updates to nursing education curricula to include relevant topics such as insurance procedures, cost-effectiveness of care, and patient advocacy.
- **Training Needs :** Results may highlight the need for specific training modules to prepare future nurses for the practical realities of working under ABPMJAY SCHEME.
- **Evidence-Based Practices:** Research outcomes can support the integration of EBP into nursing education, ensuring that training reflects the latest findings and trends.

Nursing Research:

- **Opportunities For Research:** It provides a new avenue for research in area such as the impact of insurance on patient outcomes, cost efficiency and cost effectiveness.
- **Data Availability;** The scheme implementation could provide valuable data for research on health disparities, care quality, the effects of health insurance on nursing practices.
- **Findings And Grants;** There may be increased opportunities for research funding focused on improving care practices and outcomes within the framework of ABMJJAY.

Nursing Administration

- **Policy Implementation** Administrators may need to develop and implement policies that align with the scheme's objectives, ensuring compliance and effective service delivery.
- **Resource Allocation;** Efficient resources management becomes crucial, including staffing, training, and equipment to handle the increased patient load.
- **Co-Ordination;** Administrator will need to coordinate between insurance providers, healthcare facilities and nursing staff to ensure smooth operations and optimal patient care.

RECOMMENDATIONS

Based on the study findings, the following recommendations were made for further study.

1. Different age groups with different occupational set up.
2. Comparatives studies can be done
3. With different intervention measures
4. Adopting as a basic tool for patient under ABPMJAY health insurance.

REFERENCES

1. Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) to be launched by Prime Minister on September 23, 2018. Available at: <https://pig.gov.in/pressreleaseshare.aspx>.
2. Suvarna Arogya Suraksha trust Ayushman Bharat- Arogya Karnataka Scheme Available at: <http://arogyakarnataka.gov.in/sast/english/index.php/site-map/2018-11-23-07-28-59/about-Ab-Ark>.
3. Ayushman Bharat PMJAY, New Delhi; Ministry of Health and Family Welfare. Government of India; 2020; Available at: <https://www.pmjay.gov.in>. Accessed on Jan 23.
4. Ayushman Bharat- PMJAY [Internet]. New Delhi: Ministry of Health and Family Welfare, Government of India; 2020. Available from: <https://www.pmjay.gov.in>.
5. Ayushman Bharat and road to universal health coverage in India. Research Gate [Internet]. [cited 2023 May 27]; Available from: https://www.researchgate.net/publication/335883805_Ayushman_Bharat_and_road_to_universal_health_coverage_in_India.
6. Suvarna Arogya Suraksha Trust Ayushman Bharat- Arogya Karnataka Scheme; Available at: <https://www.sast.gov.in>.
7. Financing health care for all: challenges and opportunities - Lancet [Internet]. [cited 2021 May 27]. Available from: [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(10\)61884-3/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(10)61884-3/fulltext).
8. National Health Authority: About Pradhan Mantri Jan Arogya Yojana (PM-JAY). Accessed: June 22, 2024: <https://pmjay.gov.in/about/pmjay>.
9. Dhaka R, Verma R, Agrawal G, Kumar G. Ayushman Bharat Yojana: A memorable health initiative for Indians. *Int J Community Med Public Heal*. 2018;5:3152.
10. World health organization. Universal health coverage (UHC) factsheet; Available from: <https://www.who.int/news-room/factsheet/detail/uhc>; cited on 2020 Aug-14th
11. Safiyath A, Jeelani QG, Nagaraj S, Prajna S. A study on out-of-pocket expenditure among the urology patients covered under health schemes in a teaching hospital. *Int J Community Med Publ Heal*. 2019;6(9):3892-8.
12. Mehra P. India's Economy Needs Big Dose of Health Spending. New Delhi; Livemint; 2020. Available from: <https://www.livemint.com/news/india-s-economy-needs-big-dose-of-health-spending-11586365603651.html> updated on 2020 April 08; cited on 2020 Aug 14.
15. Dhaka R, Verma R, Agarwal G, Kumar G. Ayushman Bharat Yojana; A memorable health initiative for Indians; *International Journal community medicine public health*; 2018; Vol. 5:31; 52-53.
16. Ayushman Bharat-PMJAY. New Delhi; Ministry of Health and Family Welfare, Government of India. 2020; Available from: <https://www.pmjay.gov.in>; cited on 2020 Aug 14.
17. Ghosh, Heath Cover Scheme, New Delhi. *The Indian Express*, 2018. Available From: <https://indianexpress.com/article/explained/health-mission-ayushman-bharat-health-mission-jp-nada-health-budget-5216382>; cited on 2020 Aug 14.
18. Ministry of Health and Family Welfare, National Health Authority Govt. of India. Press Release; Testing and treating of COVID 19. Now available for free under Ayushman Bharat Pradhan Mantri Jan Arogya; New Delhi.
19. Maiya GR. Coverage, utilization and impact of Ayushman Bharat Scheme among the rural field practices area of Saveetha Medical College and Hospital. Chennai. *J Family Med Primary Care*. 2021; 10(3):1171
20. Joseph J, Sankar DH, Nambir D. Empanelment of health care facilities under Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) in India, *PloS one*. 2021; 16(5):e0251814.