

FACTORS MILITATING AGAINST IMPLEMENTATION OF MATERNAL HEALTH CARE SERVICES IN ONITSHA URBAN.

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Abstract

The study was carried out on factors militating against implementation of maternal health care services in Onitsha Urban. The researcher formulated four purposes of the study and four corresponding research questions. The sample size for the population of the study was three hundred respondents. Instrument used for data collection was four point likert style questionnaires. The data collected were analyzed using weighted mean. The result of the study showed that health workers corrupt practices that militate against implementation of maternal health care services include fraud in different ramifications. Most of health workers do not judiciously utilize the funds allocated for maternal health services, Health workers sold out most of health facilities in maternal health care services, Health workers do not judiciously dispense free drugs of government to patients, Most of health workers in maternal health care centre do not come to work and Most of health workers do not judiciously do their work. The study recommended among others that seminar and workshop should be organized for health workers on the appropriate ways of motivating and encouraging pregnant women to go for maternal health services.

Key words: Maternal Health, Implementation and Care Services

Introduction

Maternal health is the health of the women during pregnancy, childbirth, and the postpartum period. It encompasses the health care dimensions of family planning, preconception, prenatal, and postnatal care in order to reduce maternal morbidity and mortality (WHO, 2012). Maternal health (MH) is important to communities, families and the nation due to its profound effects on the health of women, immediate survival of the newborn and long term well-being of children, particularly girls and the well-being of families. The improvement of women's health status has become a long term effect on creating healthy generation. As women have a key role in the rearing of children and the management of family affairs their death and illness have cost implications for family and the community because of the indispensable role they play in child up-

bringing the adverse impact on productivity and the tremendous human tragedy that every maternal or child death represents (Ministry of health and family welfare, 2009)

Motherhood is a stage/phase cherished by most women; yet this valued and precious part of life is among the most hazardous experience that women often engage in without being aware of the risk or danger they are in (UNFPA, 2008). Pregnancy and childbirth complications are leading causes of death and disability among woman of reproductive age, especially in developing countries. One thousand girls and women die in pregnancy or childbirth related matters every day Ikamari (2014). It is estimated that about 529000 women died from the complications of pregnancy in 2000. Of this figure, Africa and Asia accounted for about 95% (502550 deaths), with each contributing half of this figure. About

four percent occurred in Latin America, while less than one percent occurred in developed countries Chinyere (2013).

More than two decades into the war against maternal deaths, Nigeria still has one of the worst maternal mortality statistics in the world. With a maternal mortality ratio of 545 per 100,000 live births, Nigeria is second only to India in the global estimates of maternal mortality Society of Gynaecology and Obstetrics of Nigeria, (2012). Nigeria loses about 145 women of childbearing age every day. According to United Nations,(2014) seventy-five percent of maternal deaths occur during childbirth and the postpartum period, and the vast majority of maternal deaths and injuries are avoidable when women have access to health care services before, during and after childbirth . Many of these deaths are preventable. The coverage and quality of health care services for women and children in Nigeria continue to fail. Presently, less than 20 per cent of health facilities offer emergency obstetric care and only 35 percent of deliveries are attended by skilled birth attendants. Magadi (2013).

Appropriate maternal health care is important in the management of complications of pregnancy (Magadi, 2013). Antenatal care service is one of the major interventions recommended for the reduction of maternal and newborn deaths (Titaley, 2010). It also provides some preventive interventions for pregnant women. These include tetanus immunization, nutrition education, and counselling regarding their plans for delivery and postpartum and family planning (Ikamari, 2014). Antenatal care ensures optimal outcome for both mother

and baby, and is important in monitoring pregnancy and reduction of morbidity and mortality (NPC & ICF Macro, 2009). World Health Organization (WHO) recommended antenatal care from a skilled health worker (example midwife, doctor or nurse). Furthermore, antenatal care provides opportunity for pregnant women to identify complications associated with pregnancy and benefit from other interventions including counselling on healthy lifestyles and management of complications (Kistiana, 2009).

Many of the common causes of maternal mortality in Nigeria such as postpartum hemorrhage, sepsis and anemia are readily preventable, detectable and manageable. Key interventions such as ensuring antenatal care attendance and having a skilled attendant at delivery have also been identified and used to improve maternal health care in many countries. However, the use of such interventions has been found to be limited in developing countries like Nigeria (Jowett, 2010). One of the reasons for this is the level of health care financing, especially by the government. The introduction of user fees has been widely implemented in government health programs as a means of alleviating pressure on constrained budgets as demands for services increase. However, this has proved to be a significant barrier to access. As more people realize that health systems should not only be concerned with improving peoples' health but also protect them against the financial costs of illness, there has been growing calls world- wide for the removal of user fees (especially for basic health services at the primary health care level). This is important in view of the

fact that currently, out-of-pocket expenditure represents 70% of health expenditure in Nigeria (Olaniyan and Lawanson, 2010).

However, many women in developing countries do not have access to maternal healthcare services and it is reported that the use of such services remain low in Sub-Saharan Africa including Nigeria; where only 58% of women have attended at least one antenatal clinic during pregnancy, 39% of births are attended to by a skilled professional, 35% of deliveries take place in a health facility and 43.7% receive postnatal care (WHO, 2012).

The scarcity of vehicles, especially in remote areas, and poor road conditions can make it extremely difficult for women to reach even relatively nearby facilities. Walking is the primary mode of transportation, even for women in labor. It is also very important to note that funds mapout for maternal care services arebeing embezzled by our politicians; most of the maternal health in our communities lack personnel to attend to pregnant women. Even the private maternal health center cannot be afforded by poor pregnant women. It is on this note that the researcher has a great interest to carry out a study on the factors militating against implementation and execution of maternal health care services in Onitsha Urban.

Research Questions

The following research questions were formulated to guide the study:

1. To what extent does corruption militate against the implementation of maternal health care services in Onitsha Urban?

2. To what extent does inadequate funding militate against the implementation of maternal health care services in Onitsha Urban?
3. To what extent does attitude of pregnant women as factor militate against implementation of maternal health care services in Onitsha Urban?
4. To what extent does government in aptitude militate against the implementation of maternal health care services in Onitsha Urban?

Method

The study was a descriptive survey carried out in Onitsha urban of Anambra State. It has a population of about 1200 pregnant women attending antenatal clinic in six hospitals in Onitsha urban, a sample of 300 pregnant mothers selected from six hospitals in the Onitsha urban. Instrument for data collection was questionnaire of bio data in section A and factors militating against the implementation of maternal health care services in section B. Section A had three items and section B had 5 items. Section B was constructed on four point likert scale of likert point as followed. Strongly agree 4points, agree 3points, disagree 2 points and strongly disagree 1point. The questionnaire was validated by three veteran researchers in Health Education department. It was pilot state for reliability in Onitsha urban using respondents of equipment to the sample. A value of 0.93 was obtained for the Pearson Product Moment Correlation Co-efficient for which the researchers took the instrument as reliable for the investigation. The researchers administered the questionnaire by hand. A total of 290 copies were dully completed and returned. The research

questions were answered using arithmetic mean with decision point of 2.50. Hence items with mean 2.50 were accepted, items of mean with less than 2.50 were rejected. Discussions and recommendations were made.

Results

Research Question 1

To what extent does health workers corrupt practices as factor militating against the implementation of maternal health care services in Onitsha Urban?

Table 1: Mean rating on the health workers corrupt practices that militate against implementation of maternal health care services in Onitsha Urban.

N: 290

S/N	ITEMS	SA	A	D	SD	?FX	X	Decision
1	Most of health workers do not judiciously utilize the funds allocated for maternal health services.	74	129	52	35	821	2.83	Accepted
2	Health workers sold out most of health facilities in maternal health care services.	112	125	37	16	914	3.15	Accepted
3	Health workers do not judiciously dispense free drugs of government to patients.	102	69	40	731	2.52	2.52	Accepted
4	Most of health workers in maternal health care centre do not come to work	70	62	78	751	2.59	2.59	Accepted
5	Most of health workers do not judiciously do their work.	138	45	98	9	893	3.08	Accepted

Analysis of the above table 1 showed that with the criterion mean score of 2.5, items 1, 2, 3, 4 and 5 scored above the criterion mean with mean scores of 2.83, 3.15, 2.52, 2.59 and 3.08 was accepted by the respondents. The implication is that

all the items on the table above are the health workers corrupt practices that militate against implementation of maternal health care services in Onitsha Urban.

Table 2: Mean rating on inadequate fund militates against maternal health care services in Onitsha urban

N: 290

ITEMS	SA	A	D	SD	?FX	X	Decision
Due to inadequate fund health workers are not being paid in time.	57	95	101	37	777	2.59	Accepted
Health facilities are inadequate due to lack of fund.	109	81	93	7	966	3.33	Accepted
Lack of fund may lead to strike by health workers	94	96	53	47	817	2.82	Accepted
Inadequate fund leads to lack of drugs for maternal health care services.	69	112	48	61	769	2.65	Accepted
Inadequate fund makes health workers to collect huge amount of money from their patients.	94	96	37	63	800	2.76	Accepted

Analysis of the above table 1 showed that with the criterion mean score of 2.5, items 1, 2, 3, 4 and 5 scored above the criterion mean with mean scores of 2.59, 3.33, 2.82, 2.65 and 2.76 were accepted by the respondents. The implication is that all the items above are the inadequate

fund militates against maternal health care services in Onitsha urban.

Research Question 3

To what extent does attitude of pregnant women as factor militate against implementation of maternal health care services in Onitsha Urban?

N: 290

S/N	ITEMS	SA	A	D	SD	?FX	X	Decision
1	Most of pregnant women do not go for maternal health services due to inadequate time in work place.	81	109	22	78	774	2.67	Accepted
2	Pregnant women do not take maternal health care services very serious.	65	125	72	28	1119	3.86	Accepted
3	Most of pregnant women are lazy to go for maternal health care services.	129	97	34	30	905	3.12	Accepted
4	Pregnant women do not have money to go for maternal health care services.	27	163	81	19	777	2.68	Accepted
5	Most of pregnant women says that health workers do not give them needed attention in maternal health care services	33	57	132	68	635	2.19	Rejected

Analysis of the above table 1 showed that with the criterion mean score of 2.5, items 1, 2, 3 and 4 scored above the criterion mean with mean scores of 2.67, 3.86, 3.12 and 2.68 and were accepted by the respondents while item 5 scored below the criterion mean score of 2.19 and was rejected. The implication is that, except for item 5, all other items on the table are the attitudes of pregnant women towards maternal health care services in Onitsha urban.

Research Question 4

To what extent does government attitude as factor militate against the implementation of maternal health care services in Onitsha Urban?

Table 4: Mean rating on the government attitudes that lead to poor execution of maternal health care services in Onitsha Urban.

N: 290

ITEMS	SA	A	D	SD	?FX	X	Decision Rule
Government do not adequately pay health workers in time.	90	100	42	58	803	2.77	Accepted
Government do not adequately provide fund for maternal health care services	76	85	99	30	786	2.71	Accepted
Government do not inadequately provide needed health facilities.	94	96	53	47	818	2.82	Accepted
Financial impropriety among government officials funds allocated for maternal health care services	81	109	22	78	774	2.67	Accepted
Government do not adequately take maternal health care services very serious	90	100	42	58	803	2.77	Accepted

Analysis of the above table 1 showed that with the criterion mean score of 2.5, items 1, 2, 3, 4 and 5 scored above the criterion mean with mean scores of 2.77, 2.71, 2.82, 2.67 and 2.77 was accepted by the respondents. The implication is that all the items on the table above are the government attitudes that lead to poor execution of maternal health care services in Onitsha Urban.

Discussion

In Nigeria most maternal death occur as a result of factors implementation of maternal health care services that contribute significantly to the high maternal mortality rates. These occur either as a result of workers corrupt practices such as embezzled the fund allocated for maternal health services, health workers sold out most of health facilities in maternal health care services, health workers collect money from patients on free drug from government, most of health workers in maternal health care centre do not come to work and most of health workers are ghost workers in Onitsha urban.

Inadequate fund militates against maternal health care services were as follows; due to inadequate fund health workers are not being paid in time, health facilities are inadequate due to lack of fund, lack of fund may leads to strike by health workers, inadequate fund leads to lack of drugs for maternal health care services and inadequate fund makes health workers to collect huge amount of money from their patients.

The attitudes of pregnant women towards maternal health care services in Onitsha urban includes most of pregnant women do not go for maternal health services due to inadequate time in work place, pregnant women do not take maternal health care services very serious, most of pregnant women are lazy to go for maternal health care services and pregnant women do not have money to go for maternal health care services.

Government attitudes that lead to poor execution of maternal health care services in Onitsha Urban includes non-payment of health workers in time, in provision of fund for maternal health care services,

non provision of needed health facilities, government officials embezzle money allocated for maternal health care services and government do not take maternal health care services very serious.

Summary

The study investigated the factors militating against implementation of maternal health care services. Four possible factors were studied and both groups of pregnant mothers accepted all of them as true factors. Analysis of data are many items militating against implementation of maternal health care services which gave rise for high mortality rate of which pregnant mothers must solicit for effective implementation of maternal services for the reduction of morbidity and mortality.

Conclusion

The conclusion of the study is that there are many factors which militate against implementation of maternal health care services such as health workers corrupt practices, inadequate fund, attitudes of pregnant women towards maternal health care services and government negative attitudes that lead to poor execution of maternal health care services which ought to be changed for effective implementation of maternal health care services to reduce the rate of morbidity and mortality in pregnant mothers.

Recommendations

Government should provide adequate fund for running of maternal health care services in the local government level. Seminar and workshop should be organized for health workers on appropriate ways of motivating and encouraging pregnant women to go for maternal health services.

Government should endeavour to, pay health workers as at when due in other motivate them to work very well. Health workers and other health stakeholders should organize aware services on the importance of maternal health care services for pregnant women. Government should provide adequate facilities for maternal health care services.

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