

Motivators and Barriers for Antenatal Care, Facility Delivery, and Postnatal Care in Rural Tanzania: A Qualitative Assessment



E. Ndaboine¹, P. Ndaki¹, L. Mwaikasu¹, D. Matovelo¹, J. Brenner², D. Buchner², C. Amour¹, T. Kyomuhangi³, W. Mweteni⁴, R. Bakalemwa⁴, B. Maendeleo¹, P. Shayo⁴, H. Swai⁴, E. Turyakira³, R. Laisser¹.

¹Catholic University of Health and Allied Sciences, Mwanza, Tanzania

²University of Calgary, Alberta, Canada

³Healthy Child Uganda, Mbarara University of Science & Technology, Mbarara, Uganda

⁴Bugando Medical Centre, Mwanza, Tanzania

Introduction

- There is high maternal and child mortality burden in Sub-Saharan Africa
- Need to strengthen:
 - Antenatal care (ANC)
 - Health facility delivery (HFD)
 - Postnatal care (PNC)
- MNCH Household Survey conducted in Misungwi District in 2016 revealed:
 - ANC attendance 4+ times = 47%
 - HFD = 61%
 - PNC attendance = 51%

Objective:

- Explore motivators and barriers to ANC, HFD and PNC
- Prior to district-wide MNCH intervention

Methods

- A qualitative study was conducted
 - Focus group discussions (FGDs)
 - Key Informant Interviews (KIIs)
- Purposeful selection of participants, which included:
 - Health leaders
 - Health providers
 - Community members
- Data was transcribed, translated and coded using Nvivo 10 software
- Thematic analysis was conducted



Fig 1. Household in Misungwi District, rural Tanzania

Results

- 12 FGDs and 7 KIIs conducted in July-Aug 2016
- Thematic analysis revealed common barriers and motivators to seek care for ANC, HFD and PNC

Barriers

Multiple prior uncomplicated deliveries

Lack of husband/partner

Greater distance from health facility

Low literacy

Families refusing permission

Motivators

Increased 'friendliness' of services

Increased sensitization and male involvement

Reduced distance to health facility

Better-equipped facilities

Table 1 & 2. Barriers and motivators to seeking ANC, HFD and PNC in Misungwi District based on FGDs and KIIs conducted in 2016

2 specific issues were also highlighted

1. Policies limiting access only to women who attend with male partners

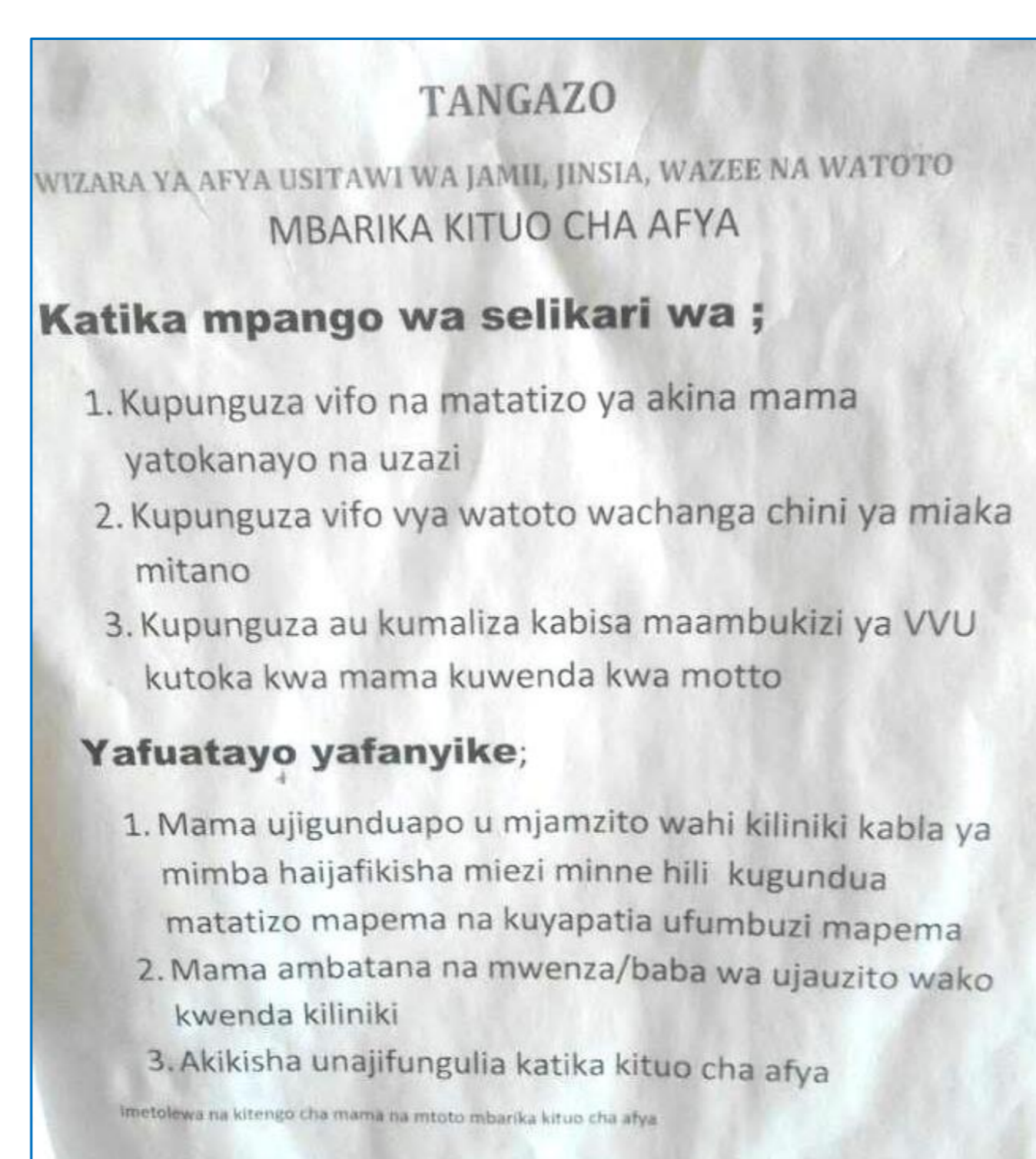


Fig. 2 & 3 Posters advertising the need for male partners to accompany women to MNCH-related appointments and services, displayed in Misungwi district

2. Lack of understanding the purpose for PNC:

- Common belief that pregnancy is over after delivery
- Belief that attendance at facility only necessary if problem arises

Discussion

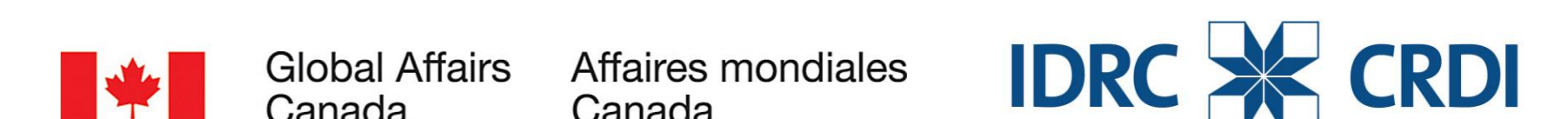
- Need to reduce barriers faced by vulnerable groups:
 - Low-literacy
 - Single women
- There is a lack of education around the need for PNC
 - Health care providers need to educate women about the importance of PNC attendance for both maternal and newborn health
 - Need to emphasize that each pregnancy is different and carries its own risks, and even experienced mothers need to attend PNC
- We require a better understanding of policy limiting access to care for women without partners
 - Need to increase sensitization and male participation
 - Also need to consider ways for single women to access care they need without having a male partner to attend ANC or PNC visits
- Joint efforts needed from:
 - Health facility providers
 - Community health workers (CHWs)
 - Development partners, and
 - Other stakeholders

References

- Government of Tanzania(2016). The national road map strategic plan to improve reproductive, maternal, newborn, child & adolescent health in Tanzania(2016-2020): One plan II. Dar es salaam United Republic of Tanzania Ministry of Health, Community Development, Gender and Elderly.
- Mama na Mtoto Project Baseline Report(2016)

Acknowledgements

"This project is undertaken with financial support of the Government of Canada provided through Global Affairs Canada (GAC). Research support is provided through an Innovating for Maternal and Child Health in Africa grant, administered through Canada's International Development Research Centre (IDRC)."



Thanks to Dhwani Paul, Jennifer Hatfield, Sylvia Tinka, Ismat Ali and the Mama na Mtoto project field teams for significant contributions to this project.



UNIVERSITY OF CALGARY
CUMMING SCHOOL OF MEDICINE

