

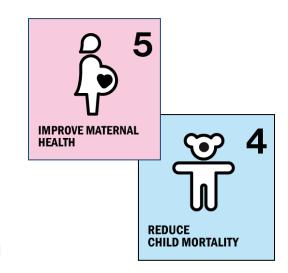


Challenges Facing Providers of Maternal and Newborn Health Care in Northern Nigeria: A Midwife's Perspective

Nafisat Omar

Introduction

- Recently, achieving MDG 5 has become a focus for countries in sub-Saharan Africa
- High maternal mortality has a strong reflection on neonatal survival
- Nigeria's maternal mortality is still high indicating challenges in the provision of quality maternal health care at the facility level







Trends in Childhood & Maternal Mortality (NDHS 2013)

Indicator	2008	2013
Neonatal Mortality Infant Mortality	40/1,000 live births 75/1,000 live births	37/1,000 live births 69/1,000 live births
Child Mortality	88/1,000 live births	64/1,000 live births
Under-5 Mortality	157/1,000 live births	128/1,000 live births
Maternal Mortality	545/100,000 live births	N/A
Total Fertility	5.7	5.5





 Workload and shortage of midwives- Workload is a major challenge in the provision of quality maternal health care services, as midwives are inadequate in number and as such attend to "more clients than usual" and these reduce time spent with clients

Risk of Infections – In the course of performing their duties, providers are exposed to various risks of infections including HIV/AIDS and Tuberculosis





- Inadequate In-Service Training- In-service trainings organized may be ineffective, and the content of most of the IST programs may not address the scope of maternal health. In some countries, such trainings attract payment
- Limited knowledge of maternal health policies and guidelines - Majority of midwives do not know the maternal health policies in Nigeria, with only a few aware of the free maternal healthcare and the safe motherhood initiative.





Ageing Workforce - The retirement of aging midwives contributes to the diminishing cadre of practicing midwives. The majority of practicing midwives are over fifty (50) years old in the facilities with many soon to retire. Also, many youth interested in the profession are not given the opportunity as intakes to midwifery training schools are limited





- Low Motivation Motivation in the profession is lacking.
 Those engaged directly in implementing the policy
 should be motivated to ensure the successful
 implementation of such a policy. Most midwives' salaries
 are too meager and had not witnessed any increment in
 their salaries for a long time
- Limited Equipment and Supporting Infrastructure The environment under which most midwives operate is appalling (dilapidated buildings etc). There are no





sufficient equipment like Manual Vacuum Aspirators (MVA), surgical gloves, wheel chairs, among others, to be able to perform their duties successfully. This is frustrating. Apart from the fact, that clinical competencies of health providers in providing basic emergency obstetric care (BEmOC) are low, drugs needed to perform such, are sporadically or completely unavailable in Northern Nigeria.





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• In- adequate ward space for delivery and resting The in-patient wards for delivery are too small to
accommodate a large number of pregnant women who
come to deliver (Southern Nigeria). Deliveries are done
one at a time and pregnant women have to form a queue
waiting for their turn. Sometimes, most of the pregnant
women have to lie on the bare floor due to the fact that
the delivery beds are not enough.





- Transportation Problem Inadequate and unreliable means of transport is another key challenge. The ambulances at the facilities serve multiple purposes and may not be available at times, when patients are to be referred to other facilities.
- In such instances, patients bear the cost of fueling the ambulances, which most patients are not able to afford.
 Most of the ambulances are over-aged.





Weak supply chain for maternal health logistics
 Facilities have supply chain challenges, ranging from forecasting, warehousing and storage, inventory control and logistics management information for maternal health





Conclusion

- Comparison of mortality rates recorded in the 2013 NDHS with estimates from 2008 shows rates have decreased in all categories
- However, Nigeria still has a long way to go to achieve the MDG target of reducing the under-5 mortality to 64 deaths per 1,000 live births and the infant mortality to 30 deaths per 1,000 live births by 2015 (Government of Federal Republic of Nigeria, 2010).







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