



Utilization of maternal and child health care services among child bearing mothers in Imo state, Nigeria

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Abstract

The study examined the utilization of maternal and child health care services among child bearing mothers in Imo state, Nigeria. One research question and hypothesis guided the study. Descriptive survey research design was used for the study. The population for this study comprised of 987,029 estimated population of child bearing mothers in Imo State. The sample consisted of 380 child bearing mothers using multi-stage sampling procedure. Questionnaire was the instrument used for data collection. Mean, Standard Deviation and Chi Square were employed to analysed the research and hypothesis respectively. The finding revealed that strategies such as building of more health centres, employment of more health workers highlighted were effective to enhance the utilization of maternal and child health care services among child bearing mothers and that utilization of MCHs by child bearing mothers is significantly independent of their location. Based on the finding, it was recommended among others that primary health centres facilities should be adequately supplied with equipment, drugs and consumables by the State and Local governments to improve the quality of ante-natal, post-natal and immunization care services.

Keywords: child health care services, child bearing mothers, Imo state

Introduction

Women and children all over the world are experiencing life threatening challenges and deaths due to pregnancy and childbirth. This may be attributed to the non-availability, inaccessibility and non-utilization of maternal and child healthcare services among nursing mothers. This high rate of maternal and child morbidity and mortality has become a serious global health issue (Babalola & Fatusi, 2016).^[5] Consequently, one of the sustainable development goals is to reduce maternal and child mortality by at least two-third and three-quarter by the year 2015 respectively through improving maternal and child health.

Maternal and child health (MCH) according to the World Health Organization-(WHO, 2010) refers to the health of women during pregnancy, childbirth and the postpartum period as well as the health of their children. Maternal and child healthcare service (MCHs) is defined according to Baba, Kaul and Heena (2013)^[4] as health service meant to improve the health of mothers and children in any given society. They further posit that the aim of MCHs is to provide quality health care and reduce maternal and infant mortality. United Nations' Children Fund -UNICEF (2007) states that maternal and child healthcare services are designed to revitalize primary health care in every setting, particularly at the grass-root level. This is to reduce maternal, newborn and the under five mortality in line with the Sustainable Development Goals target.

The components of MCHs according to Adamu (2011)^[2] include antenatal care, skilled birth attendants, post natal care, family planning, and immunization and iron supplements among others. In line with the above, the

components of MCHs functional at the location of the study include: Antenatal care services (ANC) which is a type of health care service rendered to a woman during pregnancy. Antenatal care service according to Elo (2010)^[7] is the care given to pregnant mothers so that they will have safe pregnancy and healthy babies; delivery care services (DCS) which is the care at the onset of labour till time of delivery. Nwogu (2001)^[14, 15] states that delivery care services is the assistance given to a woman during labour, delivery and immediately after delivery. This assistance can be given by skilled birth attendants who may include doctors, nurses, or some trained traditional birth attendants; post-natal care services (PNC) which are assistance given to a pregnant woman at the end of delivery. Gill, Pande and Mathotra (2017)^[8] note that during the post-natal period, mothers and children are being taken care of by observing them physically for early sign of complications, giving them advice and support for exclusive breastfeeding, facilitating their learning on the need for child spacing by using family planning method suitable for them, health education on how to care for their babies, food preparation and weaning; immunization services (IMS) are vaccine administered to babies and women to guide their bodies against infectious diseases such as: measles, mumps, rubella, hepatitis B, polio, diphtheria, tetanus and pertusis (whooping cough). WHO (2014) asserts that that immunization is a proven tool for controlling and eliminating life threatening infectious diseases; and family planning services (FPS) which is the plan intended to determine the number and spacing of children through effective method of birth control which may be natural, artificial or permanent contraceptives.

Utilization of healthcare services involves people's participation and attitude in modern health programmes. Healthcare service utilization is used to determine how a healthcare system produces healthy living in a given population. Utilization of MCHs among nursing mothers is usually influenced or marred by several factors such as long distance to health center, non-availability of staff, equipment, household behaviour, workers' attitude, cost of providing services and low income status of the women. More predominant factors include demographic factors (age, parity & location), social factors such as religion, level of education culture, availability and accessibility (Awusi, Anyanwu & Okeke, 2016).^[3] However, in this study, demographic factors namely: Age, parity, level of education and location are the factors of interest.

The respondents of this study will be child bearing mothers who may differ in their opinions on the MCHs they utilize during and after pregnancy with respect to their age, parity status, level of education and location as reported in this study. Based on this background, this study is poised to determine the MCH services utilized by child bearing mother and strategies which could be adopted to enhance utilization in Imo state.

Statement of the Problem

Maternal health services are supposed to be provided adequately and are expected to be utilized by women of child bearing age to ensure safe motherhood. However, comparatively in Nigeria and Imo State in particular, level of awareness seems not to be high enough and further compounded with poor availability of skilled attendants which usually cause unnecessary severe complications and deaths among women during delivery and after delivery. However, increased cases of maternal and child mortality is a concern as the utilization of MCHs which are expected to help reduce high mortality among mothers and child; on the contrary the level of provision and utilization of MCH services shows the amount of cases of maternal and child death is yet to be reduced. This study when completed will help to determine MCH care services utilized by pregnant mothers in order to take proactive measures towards planning to fill the gap in the availability and accessibility of the services so as not to escalate mortality and morbidity rate of pregnant mothers and their babies to the detriment of different families in Imo State.

Purpose of the Study

The purpose of the study will be to determine whether maternal and child health (MCH) care services are utilized by child bearing mothers and the strategies which could be adopted for improvement of utilization of MCH care services among CBMs in Imo state, Nigeria. Specifically, the study will determine:

1. Strategies that could be used to enhance utilization of maternal and child healthcare services among child bearing mothers.

Research Question

The following research question guided the study:

1. What strategies could be used to enhance the utilization of maternal and child health care services among child bearing mothers?

Hypotheses

The following null hypothesis was tested at 0.05 level of significance:

1. Utilization of MCHs by child bearing mothers is significantly independent of their location (rural and urban).

Methodology

The study adopted descriptive survey research design. According to Nworgu (2016),^[16] this design describes situations as they exist in their natural setting, and determines relationships that exist between specific events. The population for this study comprised of 987,029 which is the estimated population of child bearing mothers in Imo State (National Population Commission, 2009). Imo state has 518 government-owned health facilities scattered across the twenty-seven Local Government Areas (LGAs) in the state. Out of the 518 health facilities, only 351 are functional, while 73 out of the 351 have primary health care departments or units which provide maternal and child health care services. Of these 73, 59 and 14 are located in urban and rural areas respectively. The sample consisted of 380 child bearing mothers selected from the 73 health centers which have primary health care departments in Imo state using multi-stage sampling procedure. The decision to used 380 respondents for the study is to meet up with the recommendation of Cohen, Manion and Morison (2011)^[6] who suggested that when a population size is up to 30,000 and above at 95% confidence level, the sample size should be 379 and above. Based on this view, 380 child-bearing mothers were deemed as appropriate sample size for the study. The instrument used for data collection is Utilization and Strategy for Enhancement of Maternal and Child Health Care Service Questionnaire (USEMCHSQ) consisting of sixteen close-ended items developed by the researcher based on literature was used for data collection. It was structured in two parts. Part 1 sought out information on the relevant personal data of the respondents, while, Part 2 consist of one section comprising of 16 close-ended items designed to obtain information on the specific purpose of the study. The section was specifically designed to elicit information from the respondents regarding their utilization of MCHs and strategies for improving utilization of MCHs in Imo state. Respondents will be requested to check (✓) in the columns as the options apply to them.

The instrument was validated by three experts. The reliability Coefficient of.96 was obtained using Pearson Correlation Coefficient after administering instrument to twenty (20) child bearing mothers (ten from urban and ten from rural primary health centers) in Ebonyi state. The Split-half method was used to separate the questionnaire items into even and odd numbers. Nworgu (2016)^[16] posits that split-half method involves single administration of the instrument; which can be split into even and odd numbered items and it is commonly used in estimating internal consistency of tests.

Results

Research Question 1

What strategies could be used to enhance the utilization of maternal and child health care services among child bearing mothers?

Table 1: Respondents’ ratings of strategies to enhance the utilization of maternal and child health care services among child bearing mothers

S/N	ITEMS	X	SD	Remarks
1	Health education is to be integrated in all MCH services	3.5	0.64	Effective Strategy
2	More health centers should be built	3.47	0.51	Effective Strategy
3	More health workers should be employed	3.32	0.55	Effective Strategy
4	Capacity building of health workers is necessary	3.34	0.58	Effective Strategy
5	Education materials such as manuals/reference materials on MCH should be provided in all health centers.	3.52	0.59	Effective Strategy
6	Referral services/should be improved	3.45	0.64	Effective Strategy
7	Food supplements should be supplied to all health centers.	3.37	0.92	Effective Strategy
8	Promote community participation in the programme of MCH services	3.31	0.73	Effective Strategy
9	NGOs should be involved in MCHs	3.47	0.65	Effective Strategy
10	Mobile clinic should be used to promote MCHs	3.20	0.70	Effective Strategy
11	House to house visitation should be promoted in order to improve MCH services	3.14	0.89	Effective Strategy
12	Immunization should be enhanced in order to improve MCHs	3.18	0.75	Effective Strategy
13	Family planning services should be improved	3.58	0.65	Effective Strategy
14	Regular organization of free seminars and workshops on MCH services is necessary	3.21	0.77	Effective Strategy
15	Offering counseling services to mothers by health care providers	3.49	0.64	Effective Strategy
16	Adequate supply of drugs and other essential materials to child bearing mothers	3.44	0.65	Effective Strategy

Data presented in Table 1 indicates that the item by item analysis on strategies that could enhance the utilization of maternal and child health care services among child bearing mothers. The result revealed that the respondents agreed that all the items highlighted were effective to enhance the utilization of maternal and child health care services among child bearing mothers as all the items were above the criterion mean of 2.50. The standard deviation scores ranging from 0.51 – 0.92 means that the respondents’ mean ratings were closely related.

Hypothesis 1

Utilization of MCHs by child bearing mothers is significantly independent of their location (rural and urban).

Table 2: Chi-square analysis on utilization of MCHs by child bearing mothers is significantly independent of their location

Variable	N	Df	Sig value	p-value	Remark
MCHs	368	2	0.000	0.05	Sig

The analysis in Table 2 shows the chi square analysis on utilization of MCHs by child bearing mothers is significantly independent of their location. This means that the relation between these variables are significant, $X^2 (2, N = 368) = 0.002, p = 0.05$. Thus, the result revealed that utilization of MCHs by child bearing mothers is significantly independent of their location.

Discussion

The finding in research question one revealed that all the strategies highlighted were effective to enhance the utilization of maternal and child health care services among child bearing mothers. This means that the following strategies among others were considered effective; more health centres should be built; more health workers should be employed; capacity building of health workers is necessary; food supplements should be supplied to all health centres. This finding was in line with the finding of Abor and Abeka (2009) [1] that community awareness on the need for women education will help to increase their utilization MCHs. The finding also agreed with the finding of Khan and Hall (2004) that health workers in the community should be properly trained both on their duties and on their relationship to their clients to avoid scaring away mothers

by their attitude.

The finding in the hypothesis revealed that utilization of MCHs by child bearing mothers is significantly independent of their location. This finding supports the finding of Abor and Abeka (2009) [1] that the use of PNC improves with wealth, educational level of women and geographical location. The reason for a difference could mean that utilization of MCHs could be higher in the urban areas when compared to rural areas.

Recommendations

Based on the findings of the study, the following recommendations were made:

1. The primary health centres facilities should be adequately supplied with equipment, drugs and consumables by the State and Local governments to improve the quality of ante-natal, post-natal and immunization care services.
2. Complete renovation of primary health care centres facilities should be undertaken by the Imo State Ministry of Health to make the environment more conducive for health and delivery care services through increased funding of the health sector and active involvement of the community.
3. There should be the introduction of effective enlightenment programmes by the government, non-governmental organizations and community members to improve the economic and decision-making powers of women so that women would be able to utilize and afford to pay for maternal health services obtained.

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