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No roads to health: Lessons from health service delivery in rural communities of Sub-Saharan Africa**Olusimbo Ige, Kathleen Griffith and Graciela Salvador Davila**
Global Ministries, USA

Globally, the numbers of stillborn babies, neonatal deaths and maternal deaths are reducing as a result of focused efforts on low and middle-income countries. However, in many rural communities, progress remains slow particularly when there is limited access to skilled medical attendants during delivery. In response, since 2015, our organization has been implementing Maternal, Newborn and Child Health (MNCH) programs in Sub-Saharan Africa, where women are plagued by many challenges in seeking obstetric care. This study highlights persistent barriers to obstetric care in certain rural populations. Mixed methods were used to explore barriers to institutional delivery in target countries. Qualitative data were collected through Participatory Rural Appraisal (PRA) with groups of service providers, expectant mothers during antenatal clinics, mothers presenting in labor, community health volunteers, mothers in the communities served by the rural maternity centers. Notes taken during PRA sessions were edited, triangulated and coded according to recurring issues. Additionally, participants used matrix ranking to express their perceived relative significance of the barriers identified. After three years of programs many underserved communities' pregnant women now receive an integrated package of antenatal, childbirth and post-partum care. However, despite all the efforts made to increase institutional deliveries, numbers continue to lag in many rural communities where less than 50% of the mothers who attend antenatal clinic come back to have their babies at the maternity center. Factors related to limited household income, non-availability of means of transportation and physical inaccessibility of roads were highly ranked barriers to utilization of institutional delivery. Time to walk to the health facility ranged from 1-3 hours in many rural communities. It appears that the challenges to be met to increase institutional delivery are not new technologies nor new knowledge about effective interventions, the real challenge is how to improve road access to health facilities. Multi-sectoral approach is imperative to success since the main barriers to obstetric care appear to be outside the scope of the health sector.

oige@umcmmission.org

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