

Health program improves pregnancy and delivery care in Ethiopia

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The established and comprehensive health programme Health Extension Programme, HEP, aims to improve the access to health care for women and children in Ethiopia. According to Tesfay Gebrehiwot, some of the results of the programme are clearly improved coordination of prenatal care, delivery care and postnatal care of women and children in particularly deprived areas. He defends his thesis on Friday 24 April at Umeå University, Sweden.

"No woman should have to die because of pregnancy or in childbirth. Even though the challenges of cultural traditions, poverty, low education levels and unavailability of transport still remain and hamper the access to care, my thesis shows that comprehensive efforts like this can be of crucial importance in the work with improving the maternity and child health care in developing countries", says Tesfay Gebrehiwot, PhD student at the Department of Public Health and Clinical Medicine, the Epidemiology and Global Health unit, at Umeå University.

To enable the best prerequisites for adequate [prenatal care](#) for pregnant [women](#) it's necessary to ensure the access to primary care. Furthermore, the prenatal care creates a link that later on facilitates the planning and offering of institutional delivery and aftercare for the new mother and her child. Low access to prenatal and delivery care and/or low utilisation of them is a wide spread problem, especially on the countryside in many low-income countries.

To change this, the project HEP was introduced in Ethiopia in 2003. The

health care was decentralised, and basic and preventive health care is offered chiefly to women and children. HEP is established at community level by salaried governmental Health Extension Workers (HEWs) and health posts, then later supported by women development groups. When needed, there's coordination and referring of patients for more advanced medical care at health centres and hospitals.

In his thesis work, Tesfay Gebrehiwot has studied possible changes in the utilisation of health care among pregnant and birth-giving women since the HEP project was introduced. He also investigated the reasons for the low utilisation of maternal health care services in the Tigray region of Ethiopia.

He shows that through 2002-2012 the utilisation of prenatal care increased from 28 to 47 per cent, the delivery care increased from 5 to 23 per cent and the postnatal care increased from 11 to 41 per cent in the Tigray region. Some of the factors increasing the prenatal care visit rate were higher education level, being married, and having medical care in the vicinity. Factors increasing the likelihood for institutional delivery were higher education level, counselling during pregnancy, having less than four children and having experienced prolonged and obstructed labours.

The likelihood for women to use delivery care also increased with increasing awareness of pregnancy complications and the possibility to receive medical care, having a supportive husband, and having access to transport to the hospital.

Despite having the possibility to receive medical care, it's not always an obvious choice for women in the Tigray region to seek medical care during pregnancy or at childbirth, Tesfay Gebrehiwot stresses. They choose between giving birth at home in a well-known environment and cultural context, with the support of older women, and giving birth in a

hospital environment where there are possibilities to take care of medical labour-related complications, but the staff competence might vary and there's risk for poor service.

"We have interviewed health workers that confirm this description of the situation. They tell us that many women find it safer to give birth at home, but they also mention the difficulty to seek medical care as many women live in remote areas. The fact that medical care doesn't always meet the quality expectations strengthen the women's negative opinion of it, and makes them choose not to seek [medical care](#). To handle these factors is of utmost importance when improving the [health care](#) of women and children in Ethiopia", says Tesfay Gebrehiwot.

Provided by Umea University

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