

DETERMINANTS OF HEALTH SEEKING BEHAVIOR AMONG PREGNANT MOTHERS ATTENDING ANTENATAL CARE AT MALANGALA HEALTH CENTER III, MITYANA DISTRICT. A CROSS-SECTIONAL STUDY.

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Abstract

Background

A study was carried out to identify the determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care at Malangala Health Center III, Mityana District.

Methodology:

The study was a descriptive cross-sectional and it employed both quantitative and qualitative data collection methods. A sample size of 30 respondents was selected using a convenience sampling procedure. An interview guide was used to collect data.

Results:

20 (67%) did not receive adequate support and encouragement from their husband/partner to ensure access to health care services, 18 (60%) had never been health educated about home treatment for illnesses, 12 (40%) respondents resided 4 – 5 km away from Malangala Health Center III and 12 (40%) respondents spent between 5000 – 10,000shs on transport to the health facility. 20 (67%) reported that health workers had bad behavior towards patients as they were rude and not welcoming, 20 (67%) reported that health workers had negative attitudes during the provision of ANC services to mothers, 10 (33.3%) reported rude and unwelcoming health workers, as well as 8 (26.7%), reported inefficient and slow health staff.

12 (40%) respondents rated the quality of medical care received the last time they used the health care services as very good, 11 (36.7%) spent 30 minutes to 1 hour, 8 (26.7%) spent more than 4 hours, 18 (60%) reported that Malangala Health Center III is not accessible from their homes, 12 (40%) were sometimes able to get all the required services and medication.

Conclusion:

Respondents faced various socio-economic, health worker, and health facility determinants of health-seeking behaviors among pregnant mothers attending ANC services.

Recommendations:

Including improving efficiency and reducing waiting time, improving customer care, more support, and health education about ANC among others.

Keywords: health-seeking behaviors, Pregnant Women, Malangala Health Center III, Submitted: 2022-07-23 Accepted: 2023-02-18

1. Background

Poor utilization of health care services remains a major challenge globally. The provision of quality health care services to patients is an ideal that every health care institution hopes to achieve since it has many benefits attached to it including increased utilization of the health care services, patient satisfaction with the services provided as well as loyalty to the health facility (Bazrafcan, et al., 2015).

Health services can only be rated as quality services if the health personnel delivering the services strictly adhered to the available code of professional conduct and ethics based on 5 core principles including respect for the dignity of the person, professional responsibility and accountability, quality of practice, trust and confidentiality as well as collaboration with others.

Despite the provision of quality health care services, patients did not adequately turn up and utilize the available services and this was attributed to various factors including unsupportive environments, understaffing, heavy workload, burnout, low morale and motivation of health staff, lack of supervision, poverty, low level of education and lack of support among other factors.

Globally, poor utilization of health care services by patients was also experienced in developed countries such as Germany and Italy, as evidenced in a study by (Brewster, et al., 2014) whose study found that 29% of patients had left the outpatient department before being called for their examination due to patient delays and this was attributed to various factors including poor coordination among other factors.

In Sub-Saharan Africa, the situation got worse as most healthcare systems were not well developed and efficient and according to Kyeremaa (2015), their study in Ghana revealed that in an African context, poor utilization of health-care services was attributed to various factors including inadequate staffing, inefficiency, language

barriers, low staff morale and motivation among others. This was also evidenced in a study by Murff et al., (2014) whose study among the South African black population revealed that 76% relied on public hospitals and the facilities were overcrowded, understaffed, and under-resourced, contributing to waiting time of over one hour to see a health provider and subsequent poor utilization and loss of interest in the health services.

In East African countries such as Kenya and Tanzania, factors contributing to poor utilization of health services among patients included health worker/hospital-related factors such as inadequate staffing, inefficiency, language barriers, lack of money for transport and health care services, poor coordination, lack of supervision and monitoring as well as ineffective communication among others (Swanson, et al., 2014).

Poor utilization of health care services by patients in Uganda was associated with various factors including inadequate staffing, unavailability of services, stockouts of medication and other required resources, long distance to service points, absenteeism among health workers, poor allocation of available resources as well as low morale of health workers and understaffing (Sreenivas and Prasad, 2018).

2. METHODOLOGY

2.1. Study Design and rationale

The study was descriptive and cross-sectional employing quantitative and qualitative data collection methods. This study design was selected because it assisted in easily getting the required data for the study.

2.2. Study setting and rationale

The study was conducted at Malangala Health Center III, Mityana District which is found in Malangala Village, Mityana district, in central Uganda. The health center offers many health services including immunization, obstetrics, and emergency care, HIV/AIDS management services, surgical, medical, and pediatrics, laboratory services, nutrition services, family planning services, antenatal and post-natal services,

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EMTCT, and RCT services. The study setting was selected because the problem of poor utilization of health services was prevalent on the ground.

2.3. Study Population

The study included pregnant mothers attending Antenatal Care at Malangala Health Center III. The study population included 60 patients.

2.4. Sample Size

The sample size was 30 respondents, all pregnant mothers attending Antenatal Care at Malangala Health Center III, Mityana District.

2.5. Sampling procedure

The respondents for the study were selected using a convenient sampling method. The researcher selected all the available and eligible respondents available who were free and willing to participate in the study and included them in the study. This continued until a total of 30 respondents was achieved.

2.6. Inclusion criteria

The study included pregnant mothers attending Antenatal Care at Malangala Health Center III who were free and had consented to participate in the study.

2.7. Definition of Variables

2.7.1. The independent variables for the study included:

- Socio-economic determinants
- Health worker-related determinants
- Health facility-related determinants

2.7.2. The dependent variables for the study included:

Health-seeking behaviour among pregnant women

2.8. Research Instruments

Data was collected using an approved semi-structured interview guide which consisted of both open and closed-ended questions. This tool was selected because the study focused on mixed groups, and the study population included both literate and illiterate respondents who were unable to read, write and understand English.

2.9. Pilot Study

The interview guide was pretested among 6 pregnant women attending services at ANC Clinic at another health center in the district to enable the researcher to assess its clarity, accuracy, and reliability and made the necessary adjustments before applying it in the study area.

2.10. Data Collection Procedure

Due to the busy nature of the respondents, the researcher administered interview guides to the respondents from the ANC Clinic where they were found, and this improved efficiency and confidentiality during data collection. The researcher sampled 10 respondents per day for a total of 30 respondents for 3 days.

2.11. Data management

Data management included data editing before leaving the area of study to ensure that there were no mistakes or areas left blank and that any found were corrected before leaving the area of study. The filled interview guides were stored under lock and key and only accessible by the researcher. The researcher stored a copy of the data on a flash for easy accessibility.

2.12. Data analysis and presentation

The collected data was first analyzed manually by the use of papers and pens and tallying, after which the researcher presented them in tables, graphs, and pie charts generated by Microsoft Excel.

3. RESULTS

3.1. Demographic and Social Characteristics

The interview guide included questions on demographic and social characteristics such as age, marital status, level of education, and occupation. This information was assessed to find out its relationship with the determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care at Malangala Health Center III, Mityana District. The results were presented as follows.

Half of the respondents 15 (50%) were in the age range of 26 – 35 years, followed by 10 (33.3%) who were in the age range of 18 – 25 years while the least 5 (16.7%) were 36 years and above.

Majority of respondents 18 (60%) were married, followed by 7 (23%) who were single while the least 5 (17%) were divorced.

A total of 11 (36.7%) had attained primary level education, followed by 10 (33.3%) who had not attained any formal education, 6 (20%) had attained secondary level education and the least 3 (10%) had attained tertiary level education.

Less than half of the respondents 14 (46.7%) were housewives, followed by 7 (23.3%) who were farmers, 4 (13.3%) were self-employed, 3 (10%) were unemployed, 2 (6.7%) were professionals.

3.2. Socio-economic determinants of health seeking behaviors among pregnant mothers attending Antenatal Care

All the respondents 30 (100%) were aware of the health care services provided at Malangala Health Center III.

All the respondents 30 (100%) had ever attended health care services provided at Malangala Health Center III.

The majority 20 (66.7%) of respondents were not aware of the dangers of poor health-seeking behavior for illnesses while the least 10 (33.3%) were aware of the dangers of poor health-seeking behavior for illnesses including death and complications.

The majority of respondents 20 (67%) did not receive adequate support and encouragement from their husband/partner to ensure access to

health care services while the least 10 (33%) received adequate support and encouragement from their husband/partner.

The majority of respondents 18 (60%) had never been health educated about home treatment for illnesses like malaria and diarrhea while the least 12 (40%) had ever been health educated about these elements.

A total of 12 (40%) respondents resided 4 – 5 km away from Malangala Health Center III, followed by 10 (33.3%) who resided 6 km and above away, 5 (16.7%) resided less than 1 km away while the least 3 (10%) resided 2 – 3 km away.

All respondents 30 (100%) reported that they had reliable and safe transport available to get them to Malangala Health Center III.

Results showed that 12 (40%) respondents used boda boda as a means of transport to get to the health facility, followed by 7 (23.3%) who footed, 6 (20%) used taxis while the least 5 (16.7%) used private means.

A total of 12 (40%) respondents spent between 5000 – 10,000shs on transport to the health facility, followed by 7 (23.3%) who did not spend any money as they footed to the facility, 6 (20%) spent 1000 – 5000shs while the least 5 (16.7%) spent 10,000shs and more on transport.

The majority of respondents 25 (83.3%) reported that lack of money for transport and for health care services was a determinant for health-seeking behavior while the least 5 (16.7%) reported that it was not a determinant for health-seeking behavior.

A total of 10 (33.3%) mentioned lack of support from the husband/partner as a social-economic determinant of health-seeking behaviors among pregnant mothers attending Antenatal Care, 8 (26.7%) mentioned ignorance, 5 (16.7%) reported long distance to the hospital, 4 (13.3%) poverty while the least 3 (10%) mentioned rude Nurses.

3.3. Health worker related determinants of health seeking behaviors among pregnant mothers attending Antenatal Care

Most respondents 20 (67%) reported that health workers had bad behavior towards patients as they were rude and not welcoming

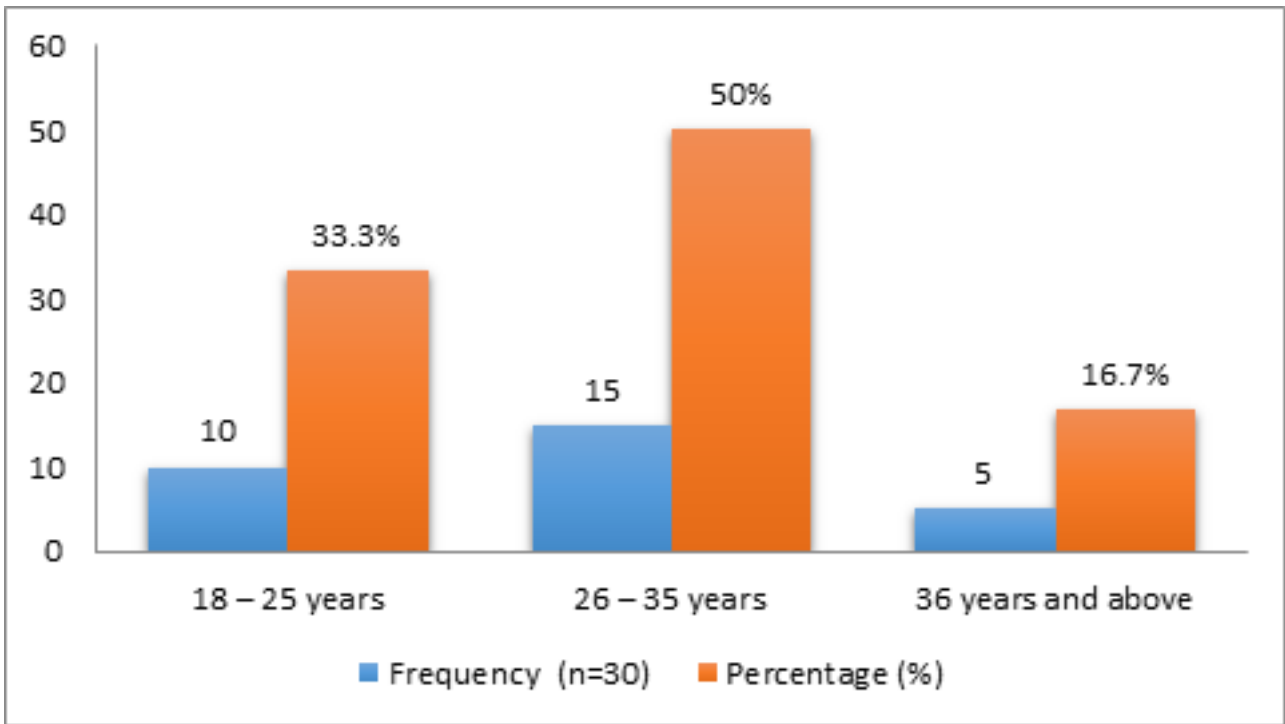


Figure 1: Distribution of respondents by age

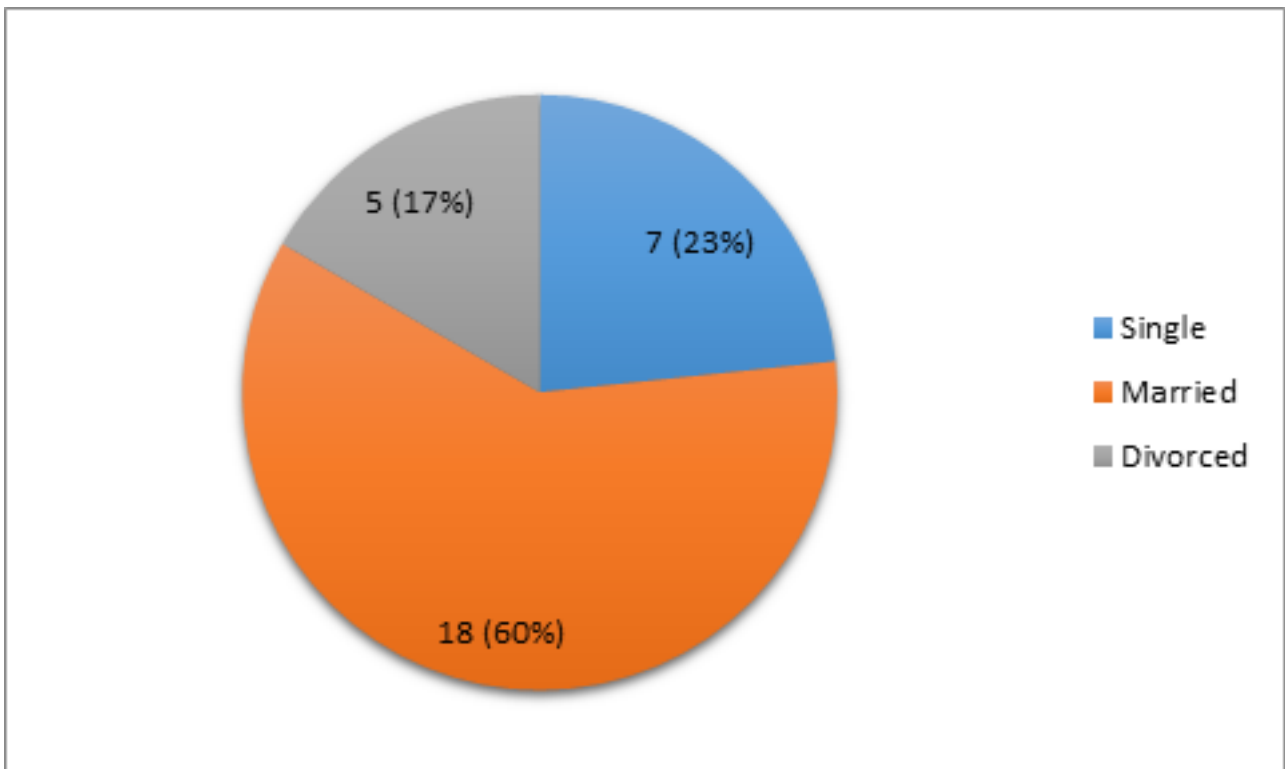


Figure 2: Distribution of respondents by marital status n=30

Table 1: Distribution of respondents by level of education

Level of education	Frequency (n=30)	Percentage (%)
Primary level	11	36.7
Secondary level	6	20
Tertiary level	3	10
No formal education	10	33.3
Total	30	100



Figure 3: Distribution of respondents by occupation n=30

Table 2: Awareness of the health care services provided at Malangala Health Center III

Responses	Frequency (n=30)	Percentage (%)
Yes	30	100
No	0	0
Total	30	100

Table 3: Ever attended the health care services at Malangala Health Center III

Responses	Frequency (n=30)	Percentage (%)
Yes	30	100
No	0	0
Total	30	100

Table 4: Awareness of dangers of poor health seeking behavior for illnesses

Responses	Frequency (n=30)	Percentage (%)
Yes	10	33.3
No	20	66.7
Total	30	100

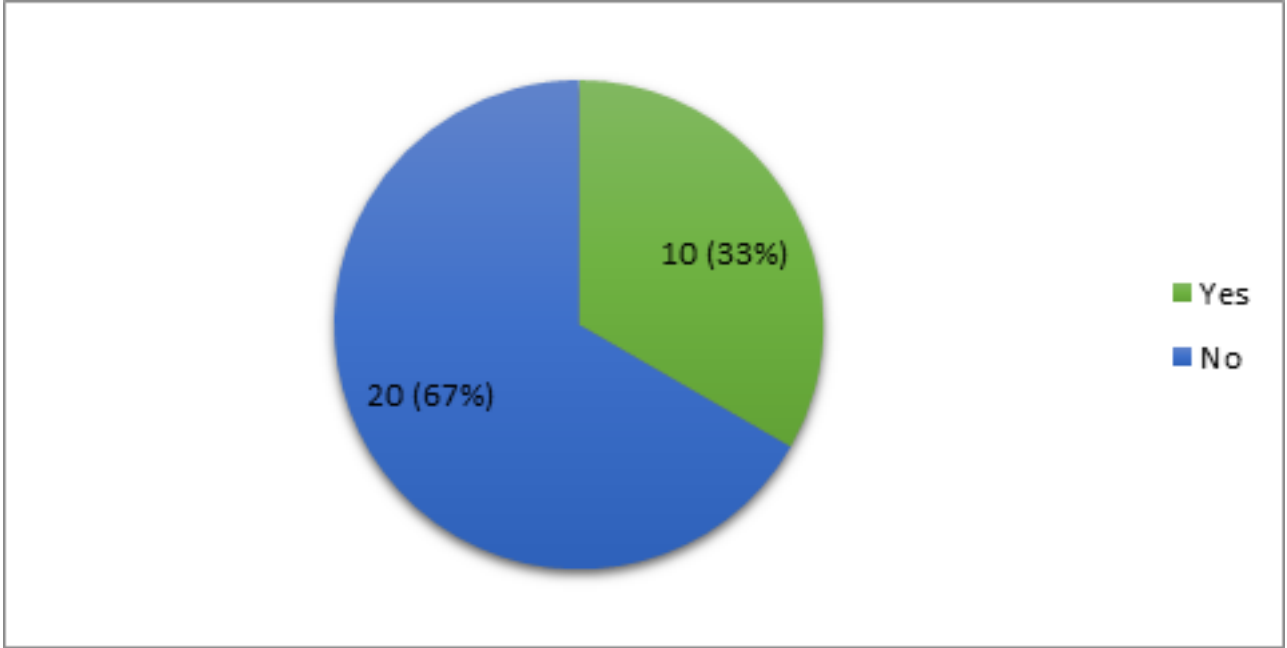


Figure 4: Whether respondents receive adequate support and encouragement from the husband/partner to ensure access to health care services at the facility n=30

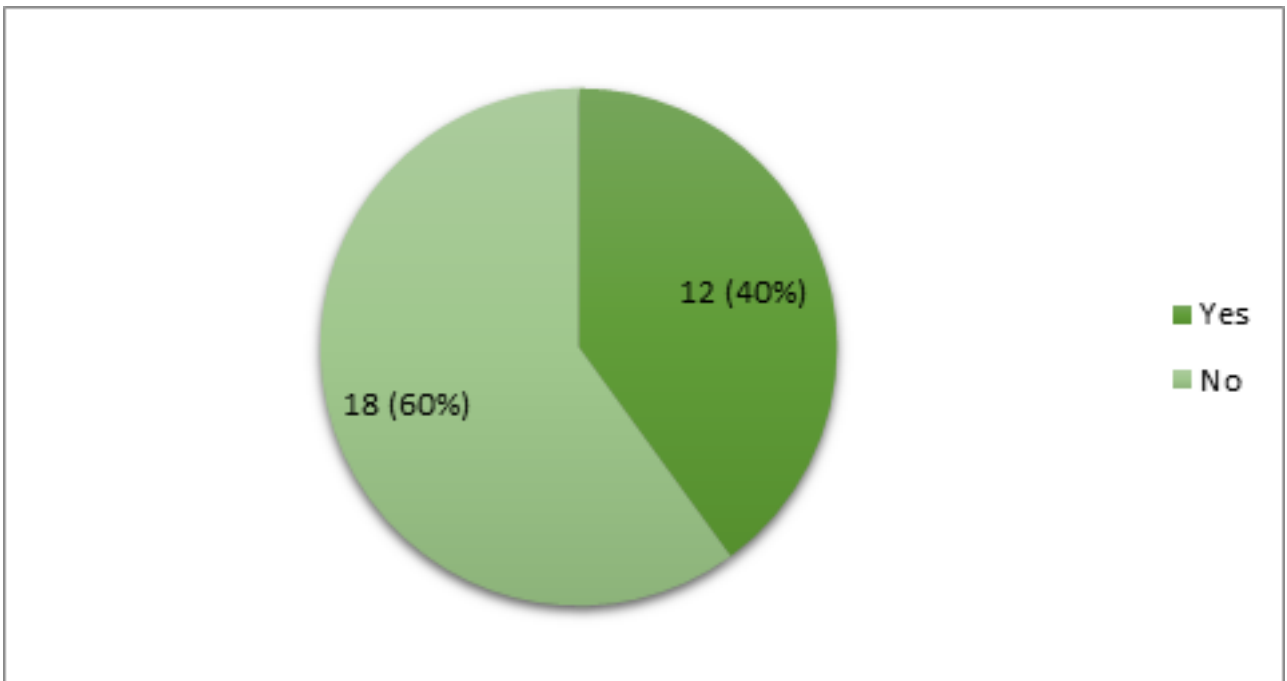


Figure 5: Ever been health educated about home treatment for some illnesses like malaria and diarrhea n=30

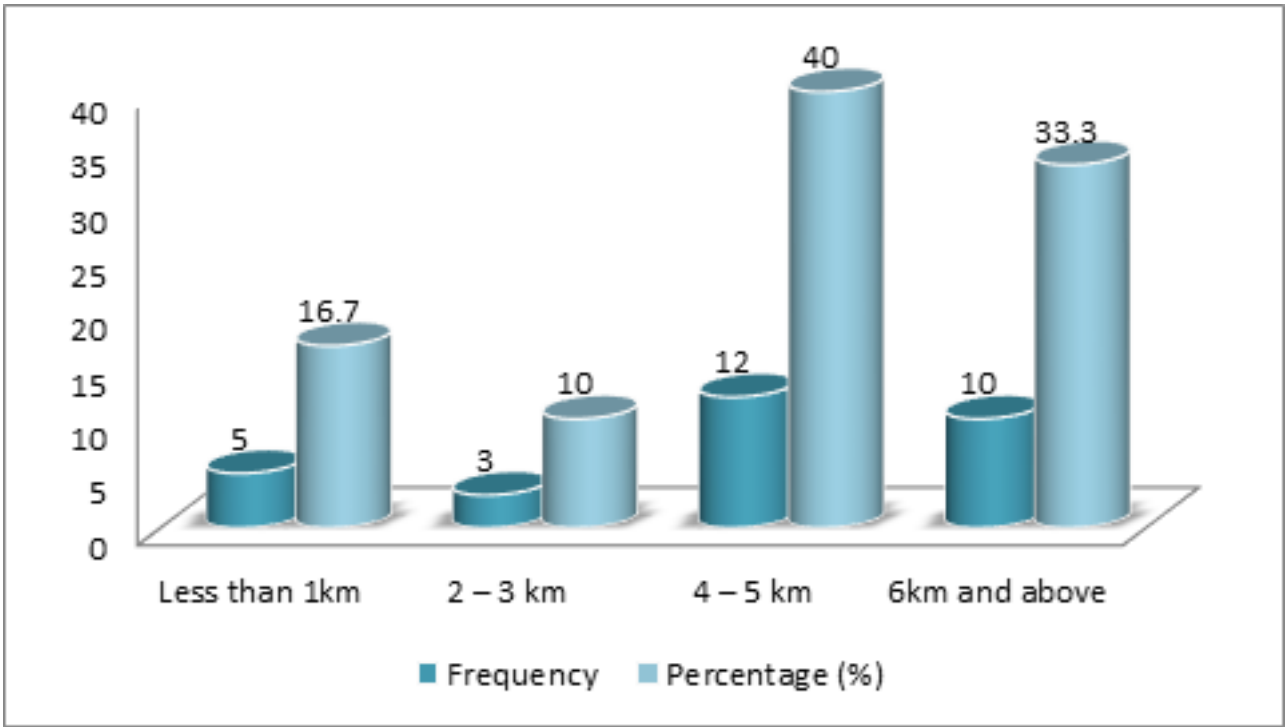


Figure 6: Distance to Malangala Health Center III from respondents' homes (n=30)

Table 5: Availability of reliable and safe transport to get them to Malangala Health Center III

Responses	Frequency (n=30)	Percentage (%)
Yes	30	100
No	0	0
Total	30	100

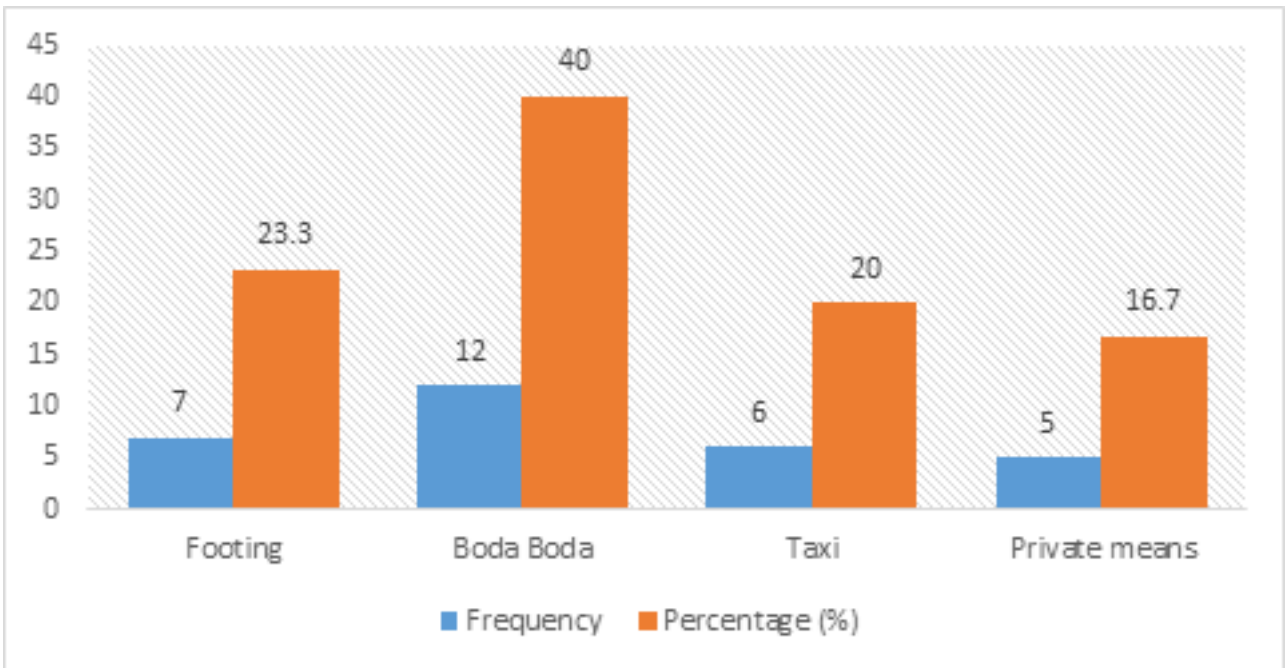


Figure 7: Means of transport used to get to the health facility (n=30)

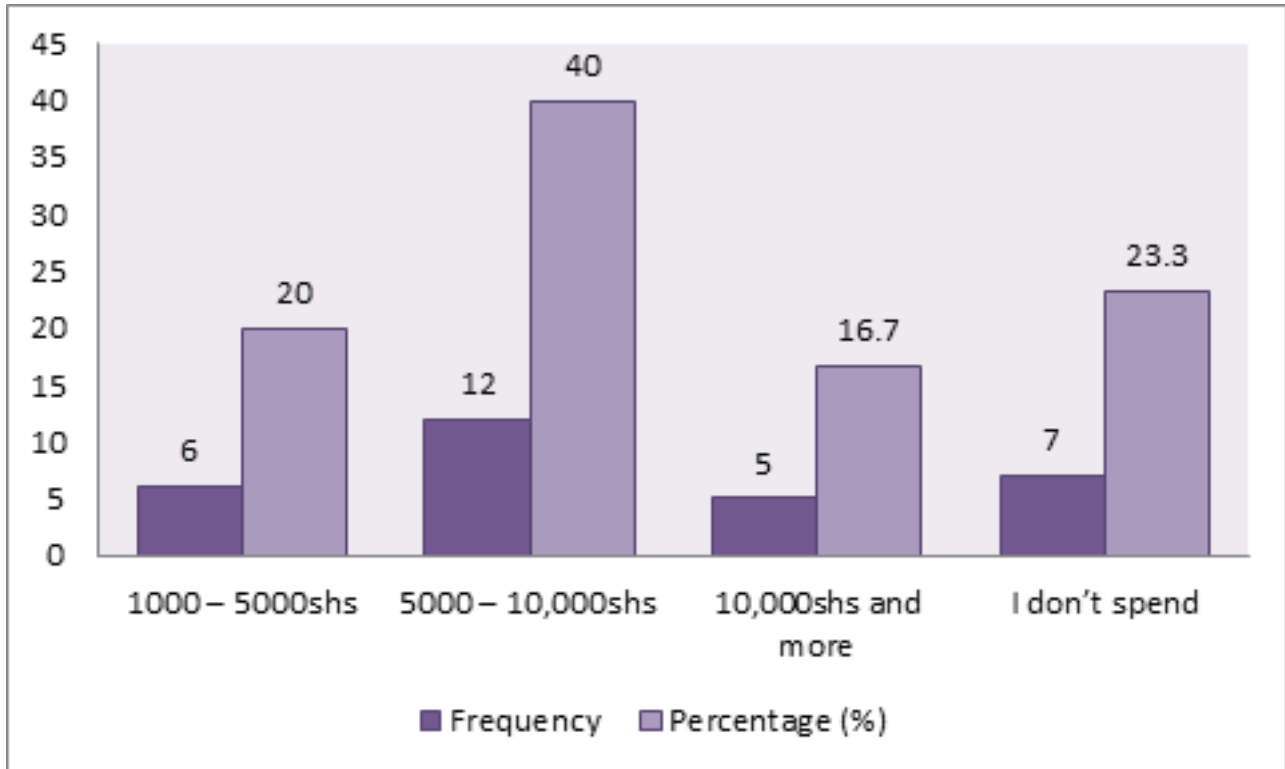


Figure 8: Amount of money spent on transport to the health facility (n=30)

Table 6: Whether lack of money for transport and for health care services a determinant for health seeking behavior

Responses	Frequency (n=30)	Percentage (%)
Yes	25	83.3
No	5	16.7
Total	30	100

while the least 10 (33%) reported that the health workers had good behaviors.

A total of 12 (40%) respondents reported that health workers sometimes had good customer care skills, followed by 10 (33.3%) who reported that they never had good customer care skills while the least 8 (26.7%) reported that they always had good customer care skills

Most respondents 25 (83.3%) agreed that poor customer care skills among health workers is a determinant of health seeking behavior while the least 5 (16.7%) disagreed.

Most respondents 20 (67%) reported that health workers had negative attitudes during the provision of ANC services to mothers which was determinant of service utilization while the least 10 (33%) reported that the health workers had

positive attitudes.

Results showed that 12 (40%) respondents reported negative attitudes towards mothers as a health worker determinant of health-seeking behaviors among pregnant mothers attending Antenatal Care, followed by 10 (33.3%) who reported rude and unwelcoming health workers while the least 8 (26.7%) reported inefficient and slow health staff.

3.4. Health facility determinants of health seeking behaviors among pregnant mothers attending Antenatal Care

All the respondents 30 (100%) had ever attended health care services provided at Malangala Health Center III.

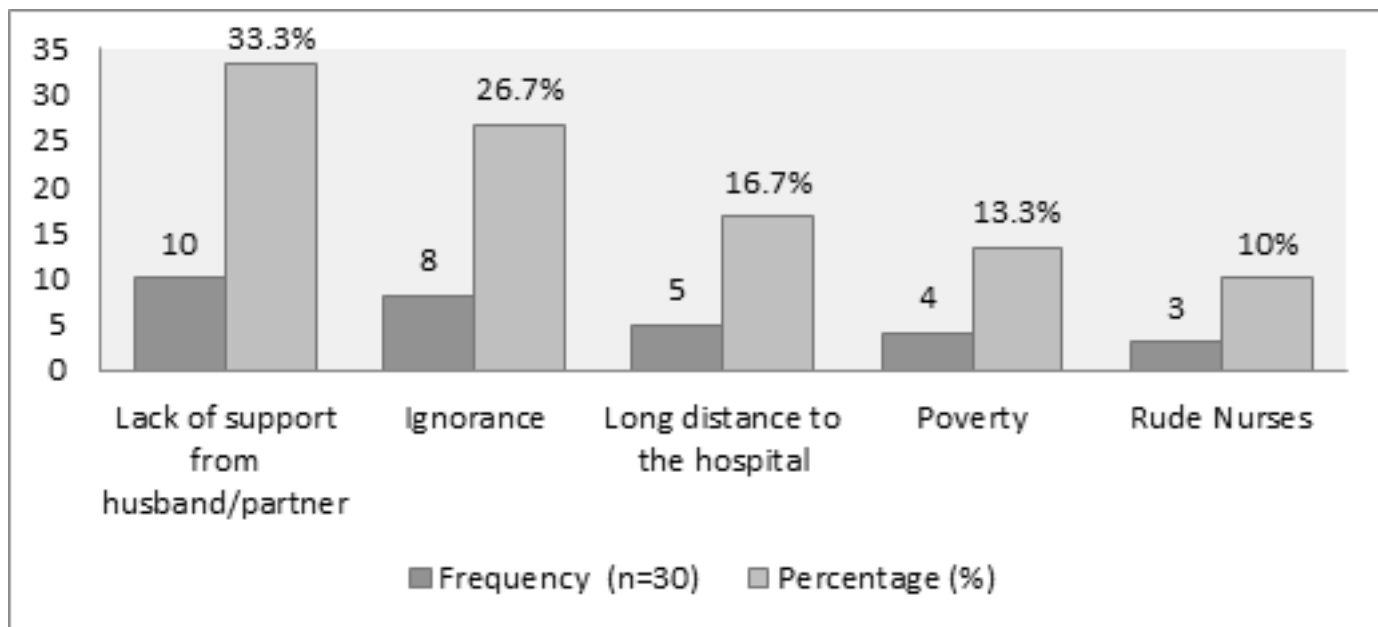


Figure 9: Other social economic social economic determinants of health seeking behaviors among pregnant mothers attending Antenatal Care n=30

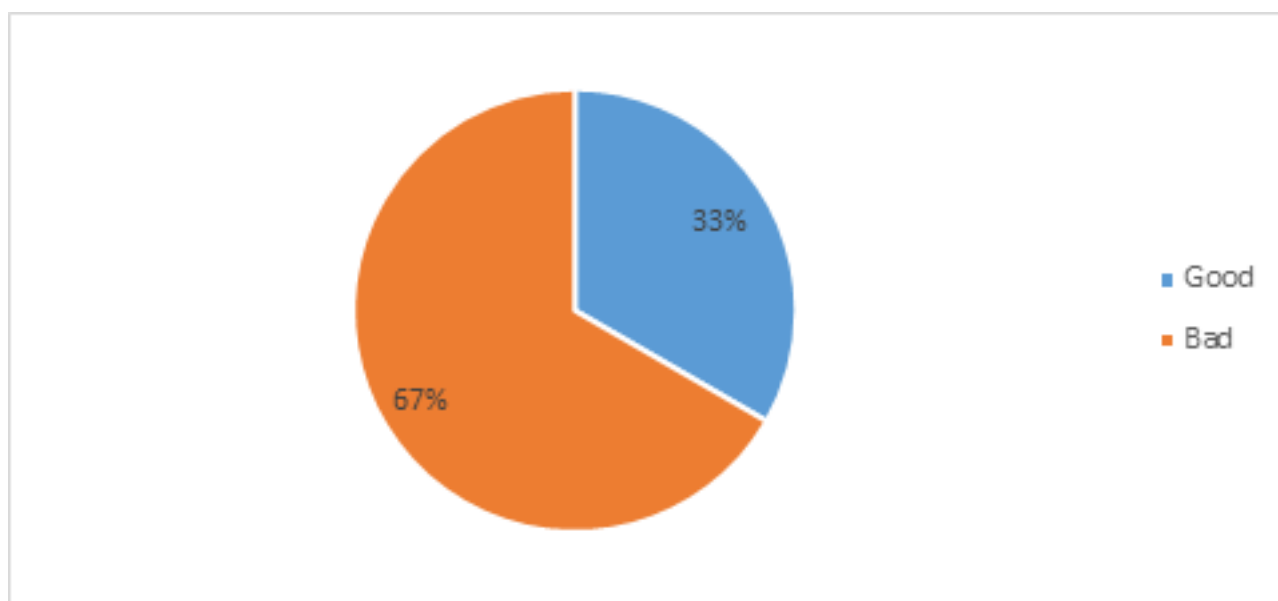


Figure 10: Rating health workers behavior towards patients (n=30)

Table 7: Whether health workers had good customer care skills

Responses	Frequency (n=30)	Percentage (%)
Sometimes	12	40
Always	8	26.7
Never	10	33.3
Total	30	100

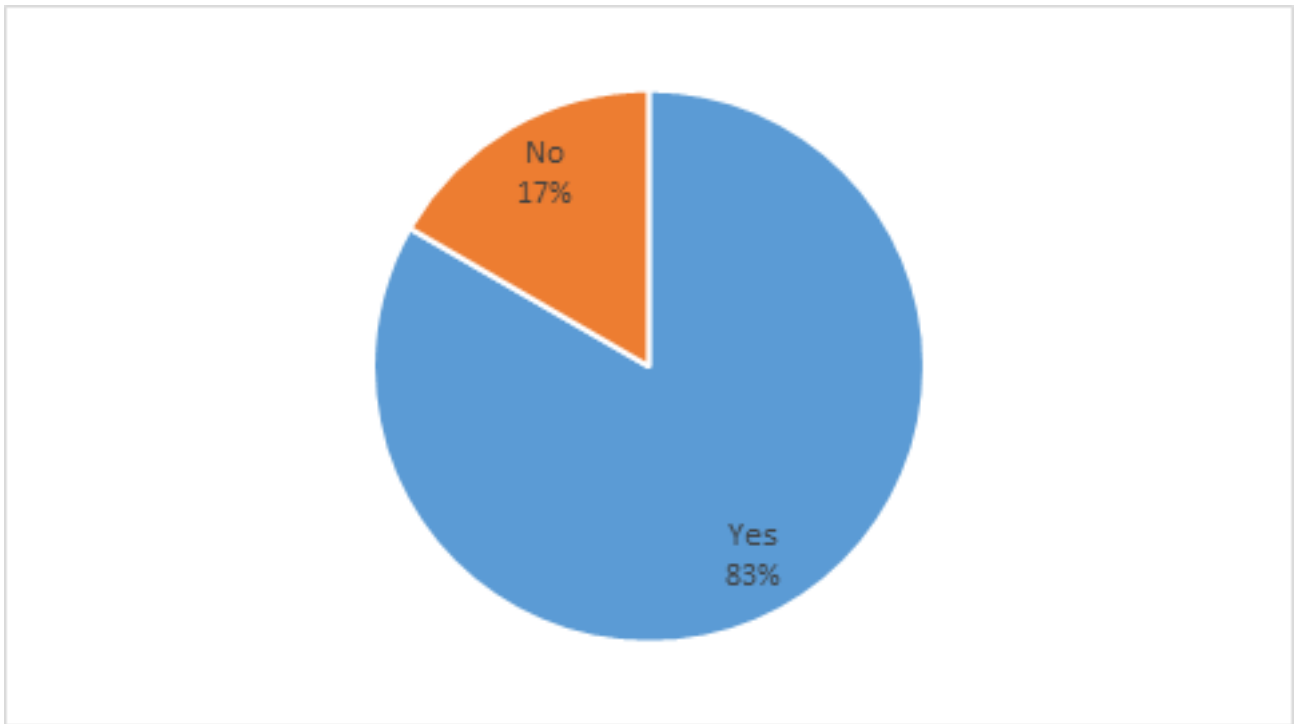


Figure 11: Whether poor customer care skills among health workers is a determinant of health seeking behavior

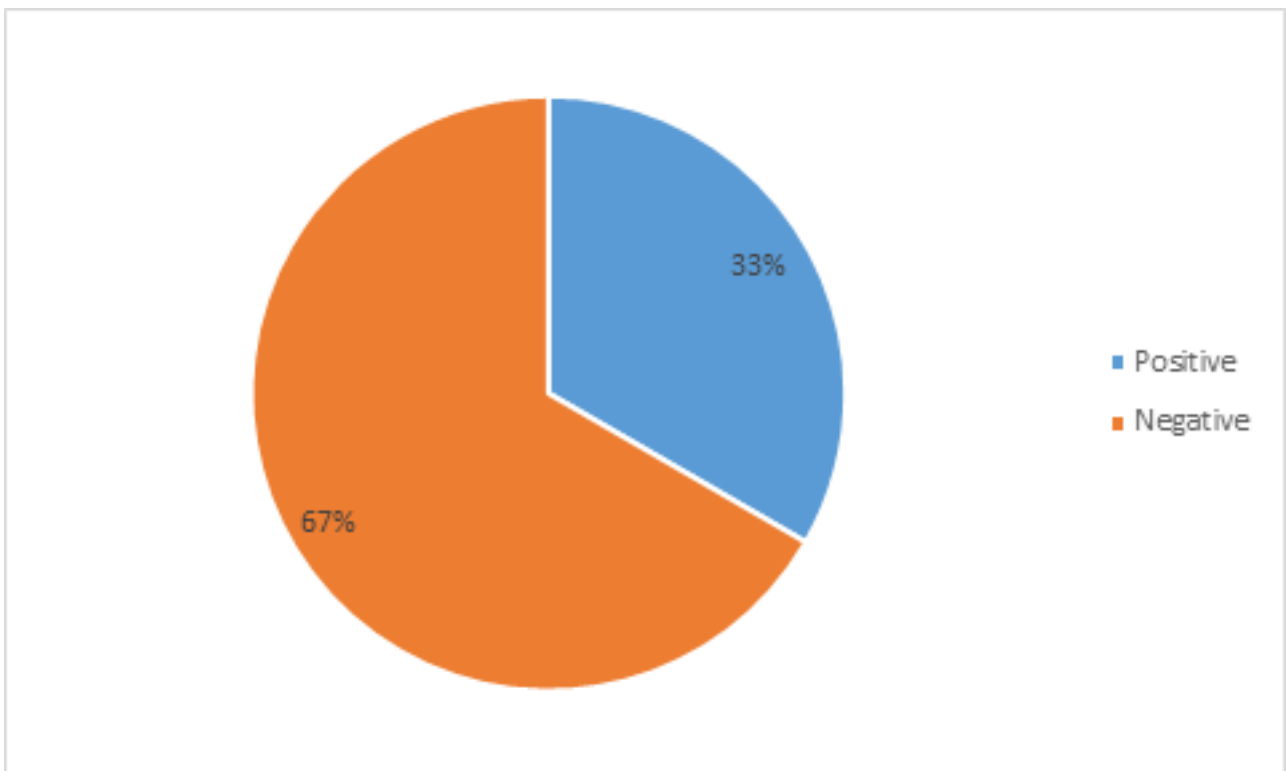


Figure 12: Attitude of health workers during provision of ANC services (n=30)

Table 8: Health worker determinants of health seeking behaviors among pregnant mothers attending Antenatal Care

Responses	Frequency (n=30)	Percentage (%)
Negative attitudes towards mothers	12	40
Rude and unwelcoming health staff	10	33.3
Inefficient and slow health staff	8	26.7
Total	30	100

Table 9: Ever attended the health care services at Malangala Health Center III

Responses	Frequency (n=30)	Percentage (%)
Yes	30	100
No	0	0
Total	30	100

Table 10: Respondents' rating of the quality of medical care received the last time they used the health care services

Responses	Frequency (n=30)	Percentage (%)
Good	9	30
Very good	12	40
Poor	8	26.7
Very poor	1	3.3
Total	30	100

A total of 12 (40%) respondents rated the quality of medical care received the last time they used the health care services as very good, followed by 9 (30%) who rated it as good, 8 (26.7%) rated it as poor and only 1 (3.3%) rated it as very poor.

A total of 11 (36.7%) said they spent 30 minutes to 1 hour, followed by 8 (26.7%) spent more than 4 hours, 7 (23.3%) spent less than 30 minutes while the least 4 (13.3%) spent 2 – 3 hours.

All 30 (100%) of the respondents agreed that long waiting time to receive services is a determinant of health seeking behavior.

Most respondents 18 (60%) reported that Malangala Health Center III is not accessible from their homes while the least 12 (40%) reported that it was accessible.

Results showed that 12 (40%) respondents were sometimes able to get all the required services and medication from Malangala Health Center III, followed by 10 (33.3%) who were always able while the least 8 (26.7%) were never able to get all the required services.

A total of 12 (40%) respondents reported long waiting time to receive services as a health facility determinant of health seeking behaviors among pregnant mothers attending ANC services, followed by 8 (26.7%) who reported long distances to the health facility, 6 (20%) inadequate infrastructure such as seats while the least 4 (13.3%) reported frequent stock outs of required drugs.

4. Discussion:

4.1. Demographic and Social Characteristics

Half of the respondents 15 (50%) were in the age range of 26 – 35 years. This showed that respondents were mature enough to understand and appreciate the importance of ANC services to ensure their good utilization.

Majority of respondents 18 (60%) were married, which implied that since they were married, they would be able to receive support and encouragement from their partners to ensure the use of ANC services. However, this was not entirely

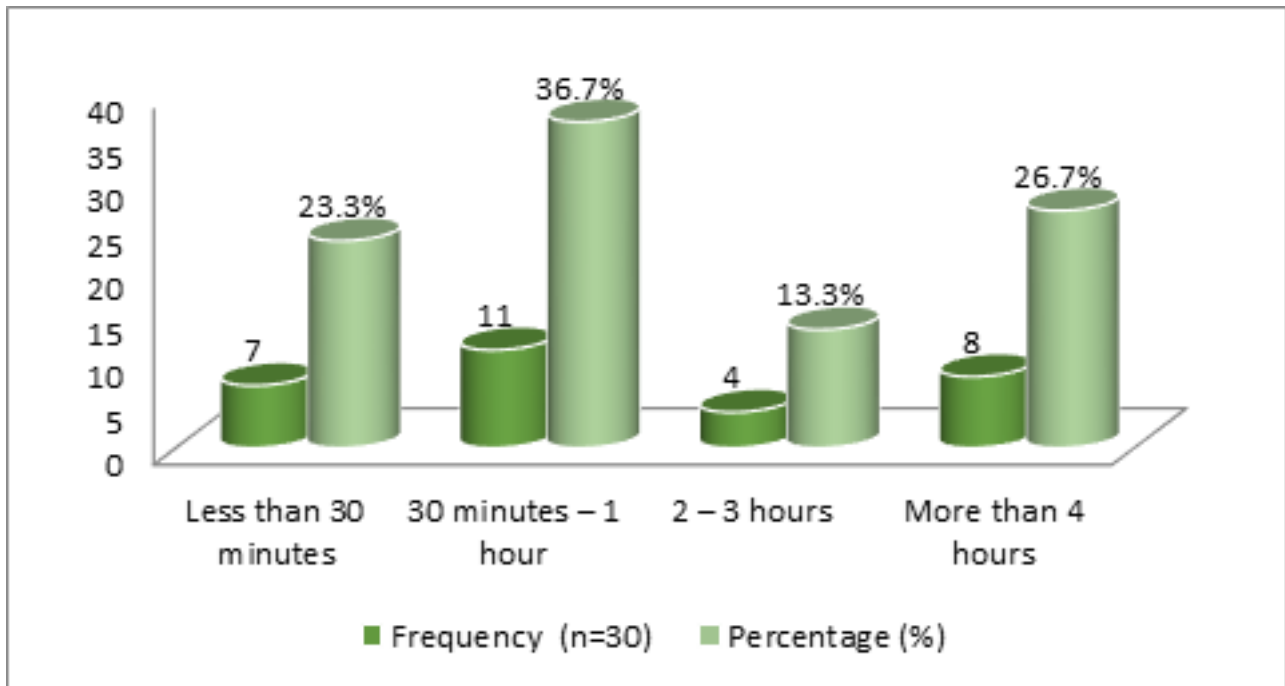


Figure 13: Waiting time to be attended to n=30

Table 11: Whether long waiting time to receive services is a determinant of health seeking behavior

Responses	Frequency (n=30)	Percentage (%)
Yes	30	100
No	0	0
Total	30	100

Table 12: Whether respondents were able to get all the required services and medication from Malangala Health Center III

Responses	Frequency (n=30)	Percentage (%)
Sometimes	12	40
Always	10	33.3
Never	8	26.7
Total	30	100

the case in the study. A total of 11 (36.7%) had attained primary-level education, followed by 10 (33.3%) who had not attained any formal education. This demonstrated that most respondents attained a low level of education and this could greatly affect their awareness of the importance and benefits of ensuring early utilization of ANC. It was mentioned that couples who were both educated presented a much higher chance of attending the ANC services as they were more aware

of the importance and benefits of ANC services during pregnancy.

Less than half of the respondents 14 (46.7%) were housewives, followed by 7 (23.3%) who were farmers, and 4 (13.3%) who were self-employed. This implied that since most respondents were gainfully involved in income-generating activity, they would be better placed to ensure adequate access to and utilization of ANC services. This study finding was in line with Carroli et al, (2013)

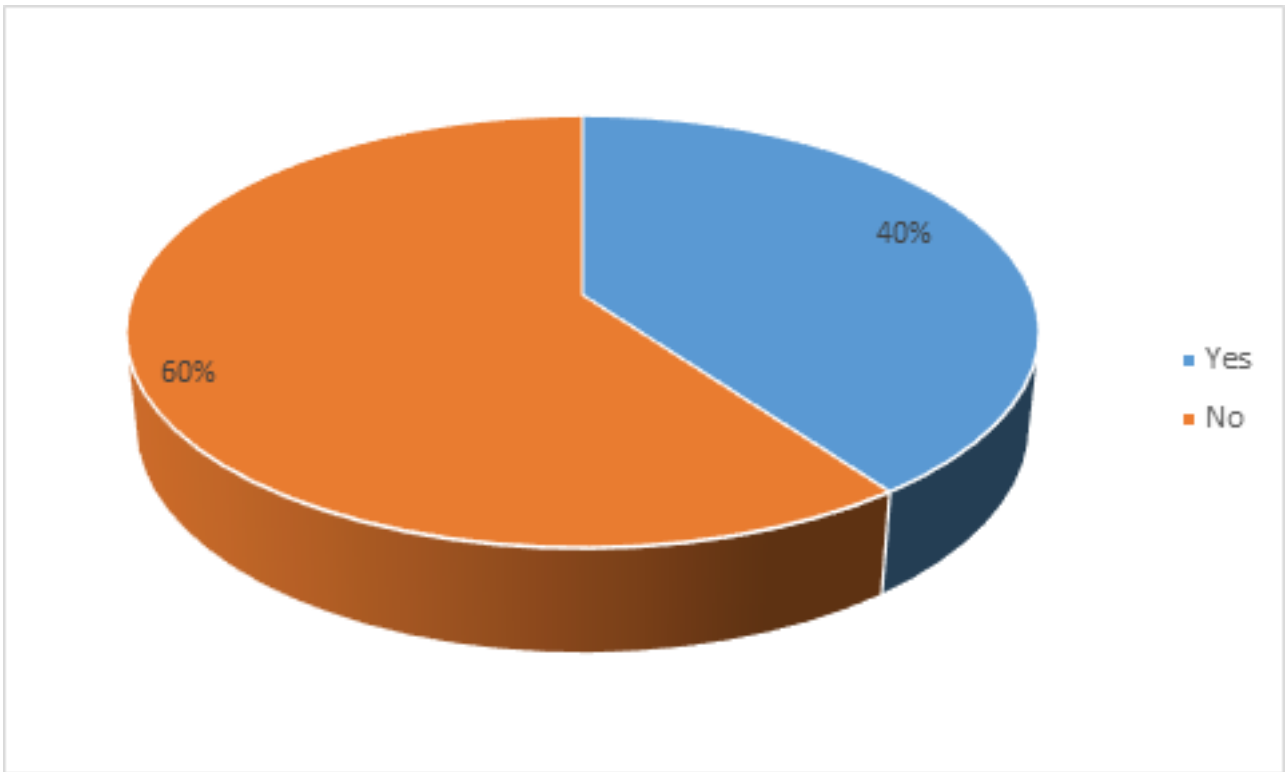


Figure 14: Whether Malangala Health Center III is accessible from respondents' home n=30

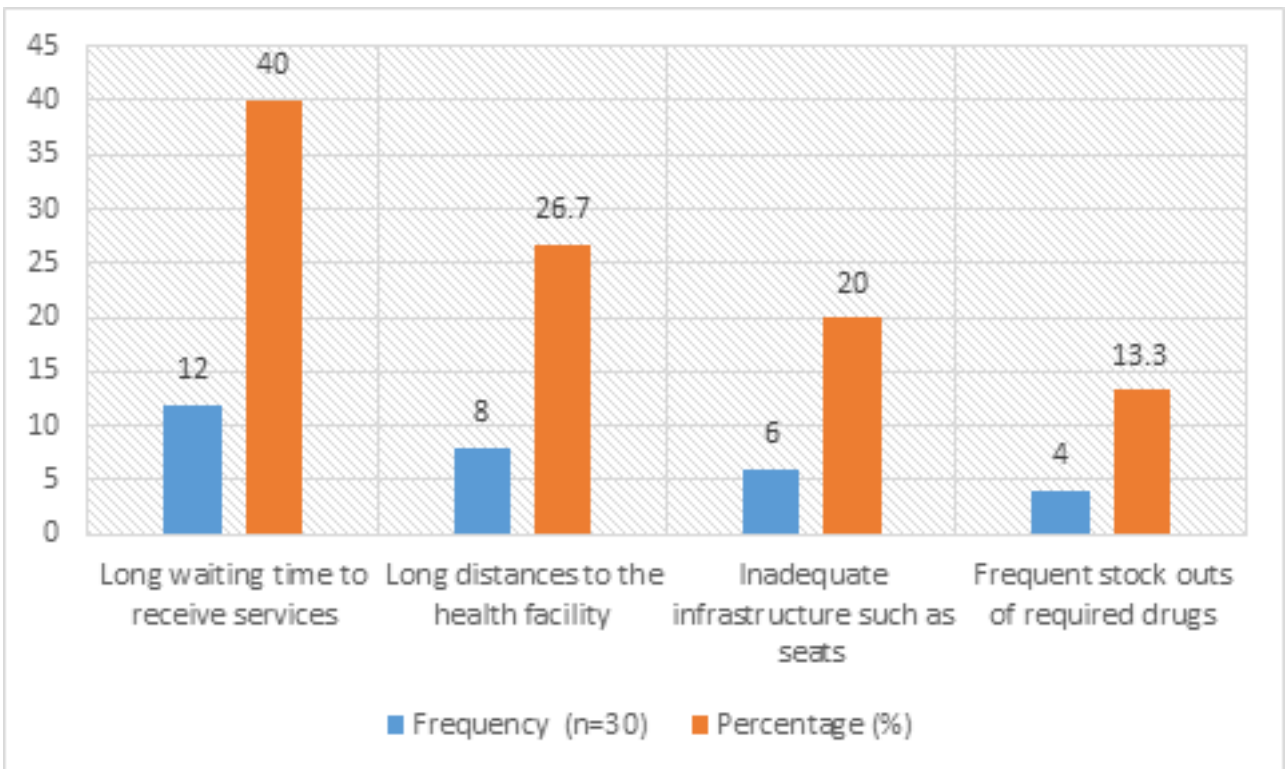


Figure 15: Health facility determinants of health seeking behaviors among pregnant mothers attending ANC (n=30)

whose study in Botswana about the effectiveness of antenatal care in preventing maternal mortality and serious morbidity documented that among the women interviewed, one of the determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care among mothers included the type of job. It was further revealed that women and their husbands/partners who had formal employment were more likely to access and attend ANC services as compared to those with informal employment as their income was not guaranteed.

4.2. Socioeconomic determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care

All the respondents 30 (100%) were aware of the health care services provided at Malangala Health Center III which implied that the failure of pregnant women to access and utilize ANC services could not be attributed to a lack of knowledge and awareness of the services provided at the health center but to other determinants.

Of all the respondents 30 (100%) had ever attended health care services provided at Malangala Health Center III. This showed that all the respondents had used services at the health center previously which implied that service unavailability was not a determinant of the utilization of ANC services by pregnant women.

The majority 20 (66.7%) of respondents were not aware of the dangers of poor health-seeking behavior for illnesses which could further influence poor health-seeking behaviors of pregnant women for ANC services. This study finding was in line with Hawley et al, (2014) whose study about the barriers to adequate prenatal care utilization in American Samoa revealed that health worker-related determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care included poor health education and sensitization of patients about the availability and benefits of good health seeking behavior as well as the dangers of failure to seek health services.

The majority of respondents 20 (67%) did not receive adequate support and encouragement from their husband/partner to ensure access to

health care services which highlighted one of the major determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care especially since a significant number of pregnant women were unemployed housewives who depended on their husbands/partners. This study was in agreement with Adamu and Salihu (2012) whose study about the barriers to the use of antenatal and obstetric care services in rural Kano, Nigeria mentioned that determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care included poor awareness of the services provided to mothers during ANC as well as lack of support of the husband/partner and the long distances to health centers/hospitals.

The majority of respondents 18 (60%) had never been health educated about home treatment for illnesses like malaria and diarrhea which implied that since most respondents had never been health educated, they would not possess good health care-seeking behaviors for health care services as they were unable to offer basic treatment and management at home.

A total of 12 (40%) respondents resided 4 – 5 km away from Malangala Health Center III, followed by 10 (33.3%) who resided 6 km and above away. This demonstrated that most respondents resided a considerable distance away from the health facility and this influenced ANC service utilization, particularly if they did not have reliable transport means or even money to pay for this transport.

All the respondents 30 (100%) reported that they had reliable and safe transport available to get them to Malangala Health Center III and 12 (40%) respondents used boda boda which implied that since they had reliable and safe transport to the facility, it would contribute to good health-seeking behaviors among for ANC services among pregnant women.

A total of 12 (40%) respondents spent between 5000 – 10,000shs on transport to the health facility, and 25 (83.3%) reported that lack of money for transport and health care services. This demonstrated that respondents spent a considerable amount of money on transport to the health facility which might directly influence ANC ser-

vices utilization. This study finding was in line with Mpungu et al, (2005) whose study about patient and health service delay in pulmonary tuberculosis patients attending a referral hospital, a cross-sectional study that some of the socio-economic determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care included poverty, which led to lack of money for transport to the health facility as well as for the health services and low socio-economic status of the patients among others.

A total of 10 (33.3%) mentioned lack of support from the husband/partner as a social economic determinant of health-seeking behaviors among pregnant mothers attending Antenatal Care, and 8 (26.7%) mentioned ignorance. This study finding was in line with Zelalem et al, (2014) whose study about the factors affecting the utilization of maternal health care services in Kombolcha District, Eastern Hararge Zone, Oromia Regional State, Eastern Ethiopia reported that socioeconomic determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care included marital status, lack of support, encouragement, and involvement by the partner/husband.

4.3. Health worker-related determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care

Most respondents 20 (67%) reported that health workers had bad behavior towards patients as they were rude and not welcoming. This study finding was in line with Heaman et al, (2014) whose study about the barriers, motivators, and facilitators related to prenatal care utilization among inner-city women in Winnipeg, Canada: a case-control study revealed that some of the health worker-related determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care included unapproachable or impatient health staff, negative attitude of staffs towards patients.

A total of 12 (40%) respondents reported that health workers sometimes had good customer care skills, and 25 (83.3%) agreed that poor customer care skills among health workers are a determi-

nant of health-seeking behavior. This study finding was in line with Whitt (2015) who reported in a study about improving service by informing customers about anticipated delays that some of the health worker-related determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care included lack of customer care skills, the inexperience of personnel and inefficiency of available staff as well as failure to adhere to professional code of conduct and ethics among other factors.

Most respondents 20 (67%) reported that health workers had negative attitudes during the provision of ANC services to mothers which was a determinant of service utilization, 12 (40%) respondents reported negative attitudes towards mothers as a health worker determinant of health-seeking behaviors among pregnant mothers attending Antenatal Care. This study finding was in line with Madan and Fathima (2008) whose study about the factors affecting patient satisfaction among those attending an outpatient department in Chennai City, India that some of the health worker-related determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care included negative attitudes towards patients, poor communication skills, lack of customer care skills and inexperience of personnel as well as lack of respect for patients.

A total of 10 (33.3%) reported rude and unwelcoming health workers while the least 8 (26.7%) reported inefficient and slow health staff. This was attributed to the way health staffs carry out their duties in a slow manner as well as negative practices such as late coming, early departures as well as poor response to patient enquiries and requests among others all of which contributed to poor utilization of health services.

4.4. Health facility determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care

Of all the respondents 30 (100%) had ever attended health care services provided at Malangala Health Center III. This showed that all the respondents had used services at the health center

previously which implied that service unavailability was not a determinant of utilization of ANC services by pregnant women.

A total of 12 (40%) respondents rated the quality of medical care received the last time they used the health care services as very good, followed by 9 (30%) who rated it as good.

A total of 11 (36.7%) said they spent 30 minutes to 1 hour, followed by 8 (26.7%) who spent more than 4 hours, and 30 (100%) of the respondents agreed that long waiting time to receive services is a determinant of health-seeking behavior. This showed that most respondents spent a considerable amount of time waiting to receive health care services and this could potentially affect health care-seeking behavior among pregnant women. This study finding was in agreement with Vissers (2016) who reported in his study about the patient flow-based allocation of inpatient resources that an important health facility factor affecting the utilization of health services was understaffing and insufficient number of health workers. If the number of health staff was not adequate compared to the number of clients, it led to delays and a longer waiting time to receive services which ultimately affected the utilization of the health services.

Results showed that 12 (40%) respondents were sometimes able to get all the required services and medication from Malangala Health Center III. A total of 12 (40%) respondents reported long waiting times to receive services as a health facility determinant of health-seeking behaviors among pregnant mothers attending ANC services. This showed that most respondents spent a considerable amount of time waiting to receive health care services and this could potentially affect health care-seeking behavior among pregnant women. If the number of health staff was not adequate compared to the number of clients, it led to delays and a longer waiting time to receive services which ultimately affected the utilization of the health services.

A total of 8 (26.7%) respondents reported long distances to the health facility, and 6 (20%) inadequate infrastructure such as seats which was in agreement with Adewuyi et al., (2018) whose

study about the prevalence and factors associated with underutilization of antenatal care services in Nigeria revealed that some of the determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care included a rural residence, the distance of health units and the remoteness of their residence.

5. Conclusion

The study found various socioeconomic determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care. Although all the respondents 30 (100%) were aware and had ever attended the health care services provided at Malangala Health Center III, 20 (66.7%) of respondents were not aware of the dangers of poor health-seeking behavior for illnesses, 20 (67%) did not receive adequate support and encouragement from their husband/partner to ensure access to health care services, 18 (60%) had never been health educated about home treatment for illnesses, 12 (40%) respondents resided 4 – 5 km away from Malangala Health Center III and 12 (40%) respondents spent between 5000 – 10,000shs on transport to the health facility, yet 25 (83.3%) reported that lack of money for transport and for health care services is a determinant of ANC service utilization.

Results also revealed various health worker-related determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care as 20 (67%) reported that health workers had bad behavior towards patients as they were rude and not welcoming, 20 (67%) reported that health workers had negative attitudes during the provision of ANC services to mothers, 10 (33.3%) reported rude and unwelcoming health workers, as well as 8 (26.7%), reported inefficient and slow health staff.

Results showed various health facility determinants of health-seeking behaviors among pregnant mothers attending Antenatal Care and although 12 (40%) respondents rated the quality of medical care received the last time they used the health care services as very good, 11 (36.7%) spent 30 minutes to 1 hour, 8 (26.7%) spent more than 4

hours, 18 (60%) reported that Malangala Health Center III is not accessible from their homes, 12 (40%) were sometimes able to get all the required services and medication.

6. Recommendations

The Ministry of Health should endeavor to create nationwide guidelines for pregnant women about the importance of adequate utilization of ANC services.

The administration of Malangala Health Center III should work together with local authorities to improve the infrastructure of the health facility to enable it to handle a large number of mothers.

The administration needs to ensure the effective provision of all required resources, equipment, and drugs to improve efficiency during the provision of ANC services.

The administration needs to improve the monitoring and supervision of health staff during the provision of ANC services to ensure good customer care skills when handling mothers.

Health workers at Malangala Health Center III should endeavor to have good communication and customer care skills which will improve efficiency and reduce delays during the provision of ANC services to pregnant mothers.

7. Implications to the nursing practice

Health workers, especially those at Malangala Health Center III can play a vital role in improving timely access and utilization of ANC services. This can be done through continuous and regular health education of mothers about the importance of early attending ANC services, having good customer care skills, and providing efficient services which reduce waiting time to receive services among others.

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9. Abbreviations

IDI	:	Infectious Diseases Institute
OPD	:	Out Patient Department
UNMEB	:	Uganda Nurses and Midwives Examinations Board
WHO	:	World Health Organization

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