Original Article

# UTILISATION OF POSTNATAL SERVICES: A DESCRIPTIVE CROSS-SECTIONAL STUDY CONDUCTED AMONG MOTHERS AT DR. RONALD BATTA MEMORIAL HOSPITAL.

Elizabeth Karungi\*, Hasifa Nansereko, Immaculate Naggulu Mildmay Institute of Health Sciences.

# $Page \mid 1$ ABSTRACT

### **Background**

Utilization of Post Natal Care (PNC) services has been associated with huge benefits to both the mother and the baby. This care which is given from immediately after birth up to six weeks after delivery is a recommended package in the continuum of maternal care aimed at reducing maternal and neonatal mortality. Timely PNC enables health workers to detect, follow, and quickly manage complications of both the mother and newborn. Despite the benefits, there's still underutilization of the services in some health facilities in low-income countries. Therefore, the study aimed at assessing factors that were influencing utilization of post-natal care services among mothers at Dr. Ronald Batta Memorial Hospital, Wakiso district.

# Methodology

This was a descriptive cross-sectional study conducted among 36 post-natal mothers, who were selected using simple random sampling at DR. Ronald Batta Memorial Hospital. Self-administered questionnaires were used for data collection and data was analyzed using Microsoft Excel 2021.

#### Results

Utilization of PNC was 69.4 % (25/36). Those who did not utilize the PNC did not know its benefits 7(63.6%), rural residents 7(63.6%) and long waiting hours 10(90.9%) were among the factors that influenced the utilization of postnatal services. The study established that the lack of awareness, rural residence, long waiting hours, and non-friendly health workers influenced the utilization of post-Natal services.

# **Conclusions**

The study established that the Poor attitude towards the utilization of PNC services, age, non-supportive Cultures towards utilization of PNC services, rural residence, long waiting hours, and unfriendly Health workers influenced the utilization of PNC among mothers.

#### Recommendations

MoH should support health facilities to increase awareness about the benefits of attending PNC clinics. Health facilities should provide follow-up services and training to increase awareness. More funds should be allocated to PNC services awareness programs. Health workers can also start providing door-to-door PNC services.

Keywords: Utilization, Postnatal, Ronald, Batta, Memorial

Submitted: 2023-12-09 Accepted: 2023-12-20 Corresponding author: Elizabeth Karungi, Email: karungielizabeth454@gmail.com Mildmay Uganda Institute of Health Sciences

# **Background of the study**

The World Health Organization (WHO, 2020) defines postnatal care (PNC) as care given to the mother and her newborn baby immediately after the birth of the placenta and for the first 42 days of life. The World Health Organization (WHO) defines a postnatal period as the six weeks after the delivery of a child (WHO, 2020). This period is deemed critical for both the mother and the child because most maternal and neonatal deaths occur within the period and it is reported that close to half of all maternal deaths occur mostly during the first 24hours after birth and in the first week after birth (United Nations (UN), 2021).

The immediate postpartum period is critical for the survival of both mothers and newborns because that is when most physiological adaptations occur (Sserwanjaet al., 2022). In this regard, receipt of timely postnatal care (PNC) is widely used to

track progress toward national and international maternal child health goals(Say et al., 2018). PNC is one of the recommended packages in the continuum of maternity care, aimed at reducing maternal and neonatal mortality (Li et al., 2017).

This service consists of care given to mothers and neonates right after delivery and up to 6 weeks postpartum to ensure optimum health for the mother and the infant (WHO, 2019). Timely PNC enables health workers to detect, follow, and quickly manage complications of both the mother and newborn (Dey et al., 2021). In addition, timely PNC accords an opportunity to receive health information and support for positive practices such as exclusive breastfeeding, maternal and newborn danger signs, and care of the newborn which are key to maternal and child health and survival (Dev et al., 2021). Therefore, WHO recommends the first postnatal check to occur within thefirst 24 hours of childbirth, and then, at least three

Original Article

other postnatal visits are arranged for all mothers and new-born, on day 3, between the 1st and 2nd weeks, and 6 weeks after childbirth (WHO, 2020)

Globally, about 63% of mothers and 48% of newborns utilize PNC within the recommended timeframe and less than 25% of newborns in less developed countries receive PNC within 2 days of delivery (WHO, 2021).

Page | 2 In Africa, postnatal care visits are low, only 34% of women attend early postnatal services (UN, 2021).

In Sub-Saharan Africa, the pooled magnitude of postnatal care utilization was 52.48%, with the highest postnatal care utilization in the Central Region of Africa (73.51%) and the low postnatal care utilization in Eastern Regions of Africa (31.71%) (Tessema et al., 2020). In East Africa, nearly half of women do not utilize postnatal care (Tessema et al., 2020).

In Uganda, among women who delivered at home, 29.4% had newborn PNC compared to 20.3% among those who delivered at a health facility (UBOS, 2019).

Postnatal care particularly prevents most maternal and child morbidity and mortality (Musaba et al., 2021). The care given in the postpartum period assists healthcare providers in detecting post-delivery problems and giving treatments timely (Musaba et al., 2021). Shortage of care during this period could result inill health, disabilities and deaths for example around 65% of maternal deaths and 75% of new-born deaths occur in the first seven days after birth, and aroundhalf of these deaths occur in the first one day (WHO, 2020) A new-born is about500 times more likely to die in the first day of life than at one month of age (Mgawadere et al., 2018).

It is upon this background that the researcher determined the factors influencing the utilization of postnatal care services among mothers at Dr Ronald Batta Memorial Hospital, Wakiso district.

# **METHODOLOGY**

#### Study design and rationale

The study used a descriptive cross-sectional design. This was because cross-sectional designs are cheap to conduct and require a short time to collect data.

#### Study setting and rationale

The study was conducted at Dr. Ronald Bata Memorial Hospital which is foundin SFC military barracks in Wakiso district. Dr. Ronald Bata Memorial Hospital also known as State House Health Centre 4 is a military hospital in Uganda. The hospital is located on the premises of the Entebbe UPDF under the care of Special Forces Command (SFC), Air Force base, about 40 kilometers (25 miles)south of Kampala City. Dr. Ronald Bata was involved in the liberation struggles that brought this government into power. The hospital offers services like ANC services, immunization, laboratory, X-ray, admission, and major surgeries among others. The hospital serves especially the combatant officers together with their families but also civilians from the catchment areas of Nakiwogo, Lunyo, Nsamizi, Banga, Kitooro, and Entebbe in general and also from Kampala. The Hospital has PNC services in 3 rooms plus one tent, the hospital has 10 midwives and receives around 21 mothers per day receiving PNC services. The facility had approximately aclient turnup of 130 mothers per weekincluding soldiers and civilians who come to seek ANC services. The studysetting was selected because it was within the reach of the researcher's area of operation and was where the investigator had noted the research problem.

### **Study Population and Rationale**

The study included mothers in the post-partum period who received delivery services from there. Participants were recruited and data was collected from 3<sup>rd</sup>. to 5<sup>th</sup>. November.2023 for three days. The target population was considered because the subject content under investigation directly applies to them. However the eligible population was about 120 mothers, but because of UNMEB guidelines for students and financial constraints, I could not recruit all the participants. Therefore I calculated the sample size and recruited only 36 mothers.

### **Sample Size Determination**

The sample size of mothers in the postpartum period who received delivery services attending Dr Ronald Batta Memorial Hospital, Wakiso district who participated in this study was determined by Krejce, and Morgan's sample size

Note: N was Population Size = 40S- Was the Sample size = 36 N- Was Population Size

Therefore, the sample size was **36** respondents for the study. This sample size was chosen because it was thought to be representative of the general population.

# **Sampling Procedure**

A simple random type of sampling procedure was used to select the respondents for the study. Selected mothers according to the PNC clinic's lists were selected at random and at least every participant was given a chance to participate in the study. This was achieved by getting pieces of papers on which the words "inclusion" meaning included in the study and "exclusion" meaning excluded from the study written for the respondents to pick. Whoever picked the "inclusion" paper was given a questionnaire to fill whereas those that picked the "exclusion" paper were exempted from the study.

# **Inclusion Criteria**

The study included all mothers in the postpartum period who delivered from Dr. Ronald Batta Memorial Hospital, aged 18 and above, were English literates, Ugandans, and had voluntarily consented to participate in the study.

#### **Exclusion Criteria**

The study excluded those mothers who became mentally ill and very sick duringthe time of data collection.

# The dependent variables

were individual factors, socio-economic factors, and health facilities.

# **Independent variable**

Was post-natal care services.

# **Research Instruments**

Data was collected using a semi-structured questionnaire which

Original Article

consisted of open and closed-ended questions. The questionnaires had questions with optionswhere the respondents chose what best suited them.

#### **Data collection Procedure**

The questionnaire was in simple English for every respondent to understand. The procedure took 3 days where the researcher collected data from 12 respondents per day to obtain the required number of 36 respondents

### **Data management**

The filled questionnaires were collected, checked for completeness, and counted after every data collection day to ensure that they were returned, coded, and keptin a safe place as a backup. A flash disk was also used to store data.

# **Data analysis and presentation**

Data was manually analyzed and entered into a computer using Microsoft Excel 2019. Then was presented using tables and figures.

#### **Ethical Consideration**

An introductory letter was obtained from the principal of Mildmay Institute of Health Sciences introducing the researcher to the Medical Superintendent of Dr.Ronald Batta Memorial Hospital, Wakiso district to be allowed to conduct the study. Once permission was granted, the Charge introduced the researcher to the respondents. Respondents were assured of maximum confidentiality for allthe information that was given. The study only commenced after study objectives had been clearly explained. Participants were asked to voluntarily consent to the study and were told about free entry and free exit when the need arose. Questionnaires were then administered to participants and were filled and then later returned to the researcher who kept them in the file.

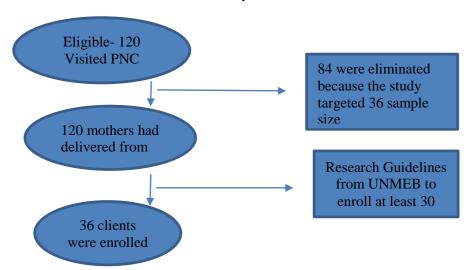
# **Anticipated Limitations of the Study**

The researcher encountered time constraints in the course of the study like balancing the research study and other demanding course works. However, the researcher overcame these limitations by drawing a timetable that was strictlyadhered to to overcome the time constraints.

Financial constraints due to limited funds. However, the researcher used her little savings to overcome the problem.

#### **RESULTS**

120 participants were eligible for the study, whoever the study enrolled only 36 participants following the UNMEB research guidelines of having at least a sample size of 30 participants for quantitative studies at diploma level because of limited time to complete the program, therefore 36 participants were not enrolled.

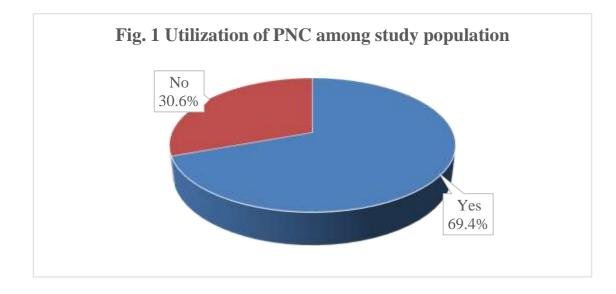


Utilization of Post-natal services among the study population

Of the 36 respondents, about 69.4 % (25/36) completed all the recommendedPNC visits as shown in Figure 1.

Page | 3

Original Article



Individual-related factors influencing the utilization of postnatal careservices among mothers

Page | 4

The majority, 7(63.6%) of those who did not fully utilize PNC

did not know the role of PNC. Those aged 21-25 (36.4%) and 32(36.4%) years and above and not getting support from the spouse 7(63.6%) were not likely to complete the schedule. Details are presented in Table 1.

Table 1: Individual Factors Influencing Utilization of PNC Services amongRespondents (n=36)

Variable	Outcome		
	Completed PNC, n (%)	Never Completed n (%)	
Age of the mother			
Less than 20 yrs.	4(16)	1(9.0)	
21-25	6(24)	4(36.4)	
26-31	5(20)	2(18.2)	
32 years and above	10(40)	4(36.4)	
Marital Status			
Married	100% (36)		
nationality			
Ugandan	100% (36)		
Knows the role of PNC			
Yes	16(64)	5(45.5)	
No	9(36)	6(54.5)	
Got Support from their partners			
Yes	18(72)	4(36.4)	
No	7(28)	7(63.6)	
Thought health workers provided goodcare			
Yes	20(80)	8(72.7)	
No	5(20)	3(27.3)	

Socio-economic factors influencing Utilization of PNC services at Dr.Ronald Batta Hospital

Original Article

Participants who were not sure, 5(45.4%) their culture supports PNC were morelikely not to fully utilize PNC. Residing in a rural area 7(63.6%) was associated with non-utilization of PNC as presented in Table 2.

# Table 2. Socio-economic factors Influencing utilization of PNC Services atDr. Ronald Batta Hospital

Page | 5

Variable	Outcome		
	Completed PNC, n (%)	Never Completed n (%)	
Culture supports PNC			
Yes	12(48)	4(36.4)	
No	10(40)	2(18.2)	
Not sure	3(12)	5(45.4)	
Use Herbal Medicine			
Yes	15(60)	3(27.3)	
No	10(40)	8(72.7)	
Residence			
Rural	9(36)	7(63.6)	
Urban	16(64)	4(36.4)	
Employment Status			
Employed	5(22.7)	2(18.2)	
Not Employed	20(77.3)	9(81.8)	
Number of Children			
1	4(16)	2(18.2)	
2	9(36)	5(45.4)	
3	7(28)	2(18.2)	
4 and above	5(20)	2(18.2)	

# Health facility-related factors influencing utilization of PNC services atDr. Batta Memorial Hospital

The majority of the respondents 10(90.9%) did not fully utilize PNC services because they thought they took a long while waiting to get the care and 8(72.7%) thought the health workers were unfriendly. Details have been presented in Table 3.

Table 3. Health facility-related factors influencing utilization of PNCservices at Dr. Batta Memorial Hospital

Variable	Outcome		
	Completed PNC, n (%)	Never Completed n (%)	
Provides HealthEducation			
Yes	25(100)	9(81.8)	
No	0(0)	2(18.2)	
Friendly HealthWorkers			
Yes	17(68)	3(27.3)	
No	8(32)	8(72.7)	
PNC available			
Yes	25(100)	11(100)	
No	0(0)	0(0)	
Wait for long hours			

Original Article

Yes	19(76)	10(90.9)
No	6(24)	1(9.1)

# **Discussion of results**

Individual-related factors influencing the utilization of postnatalcare services among mothers.

The findings showed that 63.6% of the respondents who did not utilize PNC reported not knowing the benefits of PNC services. If the mothers don't know the benefits of the PNC services they will not utilise them. This was in agreement with Tesfahun et al., (2017), who revealed that lack of knowledge about the benefits of postnatal services contributed directly to its non-utilization.

The study also revealed that 36.4% of the respondents were aged between 21- 25 years and 32 years and above, married, Ugandans, and utilized the services. The age and marital status of the mother are influencing factors for mothers to utilize PNCs since they are mature enough and can get the support of the husband. This was in line with Rahman etal., (2018), who revealed that there was a direct association between the age of mothers and the utilization of postnatal services.

According to the results of this study, the respondents thought that a postnatal mother didn't need to attend PNC services. These results indicate that the majority of the mothers who didn't utilize postnatal services had a poor attitude towards the utilization of PNC services because thinking that it is not necessary to attend PNC discourages them from utilizing the services. This was in line with Izudi et al., (2019), who revealed that the poor attitude of mothers towards postnatal services directly influenced the utilization of the services.

According to the results of this study, 77.8% (28/36) of the respondents thoughthealth workers provided care effectively. These results indicate that the majority of the mothers who didn't utilize postnatal services had a good perception that health workers provided effective care to mothers during PNC. This was contrary to Hordofa et al., (2020), who revealed that the lack of confidence of mothers towards health workers contributed to low utilization of postnatal mothers. Socioeconomic related factors influencing the utilization of postnatal care services among mothers

According to the results of this study, 45.4% of the respondents reported not sure that their culture supported utilizing PNC services was not good. These results indicate that the majority of the mothers who didn't utilize postnatal serviceswere from cultures that didn't support the use of PNC services. This was probably due to a lack of adequate information about the benefits of utilizing PNC services among postnatal mothers. This was in line with (Yadav & Dhillon, 2015)in India, which revealed that 56% of the mothers who didn't utilize postnatal services had cultural beliefs that didn't support the use of such services.

According to the results of this study, 63.6% of the respondents who did not utilize PNC resided in rural areas. This was probably due to a lack of exposure to information related information about PNC in rural areas. This was in line with Yarinbab& Tona, (2019), who revealed that the residence of mothers had a positive influence on the utilization of postnatal services. Health facility-related factors influencing the utilization of post-natalcare services among mothers

According to the results of this study, 72.7% of the respondents

reported that they didn't communicate well with the health workers. These results indicate that the majority of the mothers who didn't utilize postnatal services were being worked upon by health workers with a negative attitude towards patients and mothers. This could have discouraged mothers from utilizing PNC services. This wasin line with Saol, (2019), who revealed that the negative attitude of health workerstowards postpartum mothers contributed to low utilization of PNC services.

According to the results of this study, 90.9% of the respondents reported that they waited for long hours to be worked on. These results indicate that the majority of the mothers who didn't utilize postnatal services waited for long hours at thehealth facility to receive services which could have in turn discouraged them from utilizing PNC services. This was in line with Moreda &Gebisa, (2018), who revealed that long waiting hours at the health facilities contributed to low utilization of postnatal services among mothers.

#### Conclusion

The study established that the Poor attitude towards the utilization of PNC services, age, and non-supportive cultures towards utilization of PNC services, rural residence, long waiting hours, and unfriendly health workers influenced the utilization of PNC.

# Generalizability

The findings of the study may be generalized to other health facilities in low-income countries because most of these Centres might have one or two factors influencing the utilization of PNC services among mothers.

# **Conflict of Interest**

The researcher had no conflict of interest while conducting this study.

### **Source of Funding**

The study was not funded, it was done as a requirement to complete my Diploma in Nursing Extension program.

#### **Author Biography**

The Author is a diploma Nursing Extension Student at MIHS.

#### Recommendations

# To the Ministry of Health

Support health facilities to increase awareness among postnatalmothers

The health facility and MOH Strengthen the knowledge of postnatal mothers about the benefits of attending PNC services Health workers should provide follow-up services to postnatal mothersafter delivery

Health facilities should conduct training to improve the attitude of healthworkers to postnatal mothers.

Lobby from the Ministry of health for more funding to facilitate awareness campaigns about utilization of PNC services.

Page | 6

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Original Article

# **Implications to the Nursing Practice**

The implications of these findings to the nursing practice include the following: Health workers at Dr. Ronald Batta Memorial Hospital should take every opportunity to sensitize and health educate the mothers on the benefits of utilizing postnatal care services

Page | 7

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#### **LIST OF ACRONYMS**

HMIS: Health Management Information System

UNMEB: Uganda Nurses and Midwives Examination Board

WHO: World Health Organization

**PNC:** Postnatal care

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Page | 8



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