

August 2012

## Maternal Condition in the Ntungamo District, Uganda

Ntungamo District occupies an area of 2,056 square kilometres, with a population of 469,000 people. It has 16 health centres providing maternal health care services, three of which are health centres IVs, serving as referral centres. Ntungamo District has one government hospital, Itojo Hospital, which serves the entire district. Some patients who cannot be treated in the Itojo hospital are referred to the regional Hospital, Mbarara Hospital. Those maternal health patients with their sufficient money often opt to seek help from private health facilities.

ARH is on the ground working with the volunteers and Village Health Team members to empower the community. The following data on maternal was secured from the District health office. The information obtained comprises of the first half of 2011 and 2012, i.e., January to July 2011 and January to July 2012.

### Maternal Health Summary

Table 1 January- July 2011 and January – July 2012

Period	ANC-Antenatal Clinic 1	Deliveries	Still Birth	Maternal Death	ANC-Post Natal
2011	12,260	4,333	137	9	985
2012	13,214	5,139	115	5	1965

- Available records at the district (January to June 2011 and from January to July 2012) showed a tendency of mothers attending the first antenatal clinic examination and don't back for –subsequent visits. In January-July 2011, mothers who attended antenatal care were 12,260; of those only 4,333 mothers come back for delivery; while 13,214 attended antenatal in 2012 and only 5,139 came back for delivery.
- Of all the 4,333 deliveries in 2011, only 985 came back for postnatal service, while out of 13,214 deliveries that took place in 2012; only 1,965 came back for postnatal services.
- District records also indicate that 9 mothers died during 2011 and 135 babies died at birth; while there were 5 maternal deaths and 115 stillbirths in 2012. The picture here seems to indicate an improvement in the attendance and less death for both mothers and babies in 2012.

- These stillbirth and maternal deaths do not account for deaths at home and other non-government facilities. It is therefore not clear how many death are missed, since these centres are not monitored
- Records at the District show that only 30% of pregnant mothers access skilled service delivery, while the remaining 70% delivered under unskilled women.

## **Some of the causes**

A survey of possible causes for poor maternal conditions conducted by ARH staffs, indicate that the causes for disabilities and death were attributed mostly to delay in going to referral hospitals for emergency care, as well as from anaemia and HIV.

It was also noted that there are clear deficiencies in:

1. Community members' attitude towards the health care givers,
2. Materials and equipment to use to address some of the complication in health facilities,
3. Health care providers' attitude towards work,
4. Staffing in health facilities.

During the ARH's outreach, mothers met both in the communities as well as the maternity centres visited; when asked why they don't attend all the recommended ante natal clinics; had the same answers. Some said they needed to have a record in the centres to avoid being questioned in case they came to have babies in the centres. Others said they did not have money to bring them all the recommended times. Others said the health providers were rude. While others had been told they didn't have to go to health centres since their mothers and mother in laws made it at home.