

BARRIERS TO ACCESS INSTITUTIONAL DELIVERY SERVICES IN URBAN AREA OF HAKHA, CHIN STATE

SHARON PAR

M.B.,B.S

2016

ABSTRACT

Utilization of maternal health services is associated with improved maternal and neonatal health outcomes. Maternal and neonatal deaths are closely linked to place of, and care at, delivery. This study aims to find out barriers to accessing institutional delivery in the urban area of Hakha, Chin State. Chin State had institutional delivery rate of 14.4% compared with Union rate of 37% in 2015.

A cross-sectional analytic study using semi-structured questionnaires was conducted in this quantitative study using a local language involving a total of 105 mothers who had under-five children. Two separate focus group discussions in local language with 17 mothers were also organized as part of a qualitative study. In quantitative findings, there was significant association between selection of place of delivery and family income, number of family members, parity, history of difficult labour, low knowledge level regarding pregnancy, transportation, privacy, need of help in language and physical safety. Qualitative study uncovered that barriers to utilize health facility were direct and indirect cost of delivery, quality of health service, unsecured personal privacy, distance, inadequate and lack of basic amenities, language barriers, no one to look after them, low level of knowledge and information, and availability of specialists.

Institutional delivery rate and knowledge on pregnancy-related issues were still low even in urban area Hakha. Actions targeting the poor, awareness-raising in local language, improving quality of services in the area, demand-side financing with improvement of supply side constraints are recommended to improve institutional delivery aiming to reduce the maternal and neonatal morbidities and mortalities.