

Access to pregnancy, delivery care and family planning in rural and urban Kenema, Sierra Leone



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BACKGROUND and AIMS

Sierra Leone reported the highest mortality ratio worldwide in 2015. Maternal health outcomes were affected by the 2014-16 Ebola outbreak, which further exposed weaknesses in the health system.

Médecins Sans Frontières (MSF) has constructed a specialized maternal and pediatric hospital in urban Kenema district that was inaugurated in March 2019.

We aimed to assess the use of healthcare services by women for childbirth and children under 5 in urban (Kenema town) and rural (Goroma Mende/Wandor chiefdoms) setting, before the opening of the hospital.

METHOD

Household quantitative survey conducted in April-June 2018.

Two stage sampling method.

Study based on the MSF OCA Tonkolili 2016 survey methodology.

Face-to-face interviews using structured questionnaires.

Women who gave birth to a child after Ebola and children <5.

RESULTS

We interviewed **927** women and **693** children care-givers.

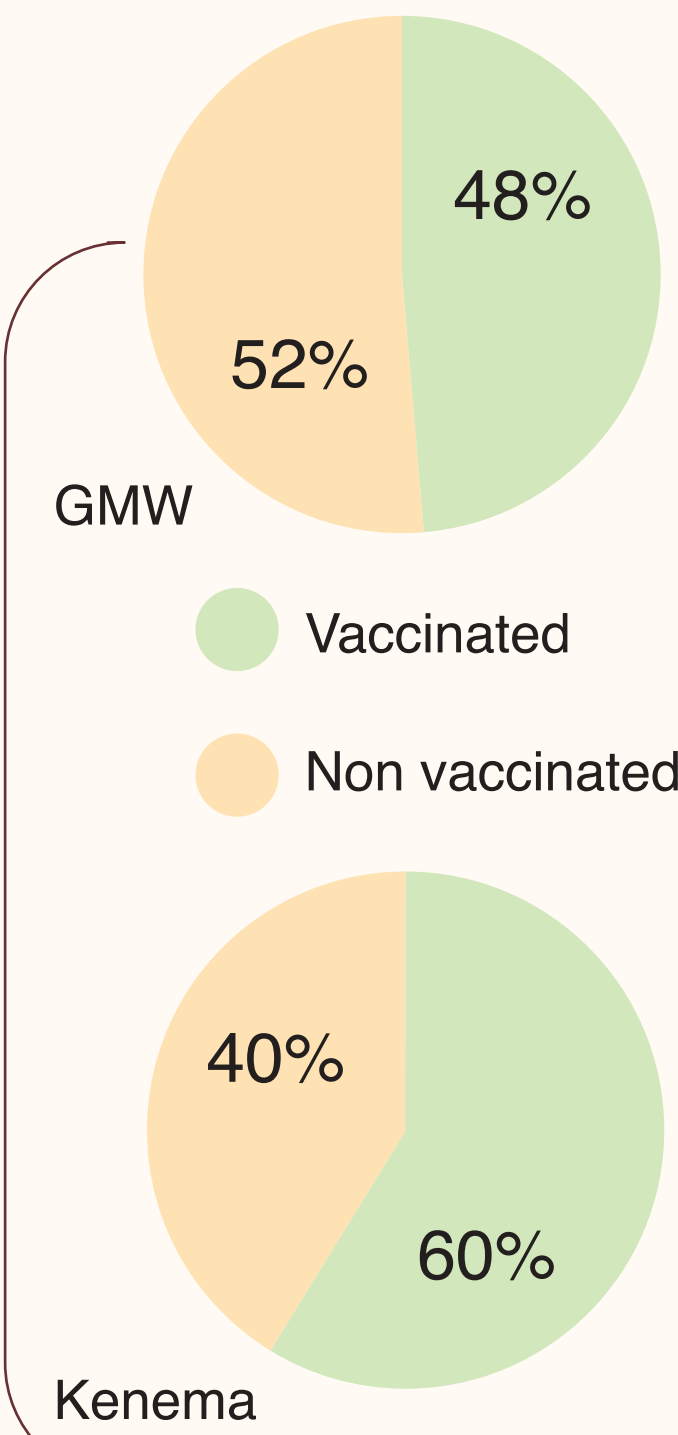
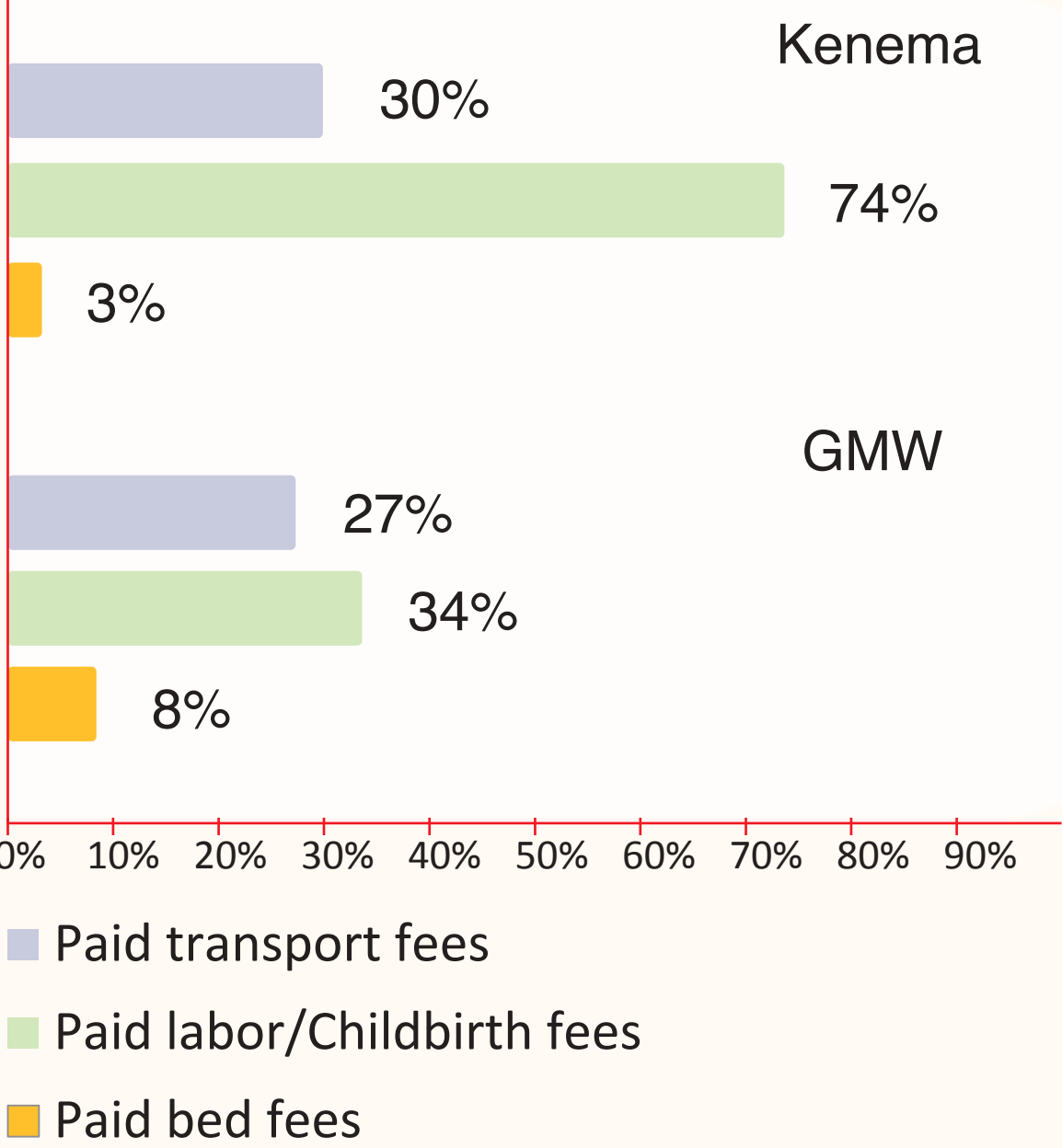
Home deliveries is more frequent in GMW (Goroma Mende/Wandor) (16.3% versus 8.0%, $p<0.001$) and significantly associated with illiteracy, absence of a skilled birth attendant, and long distance from a health facility.

Women health seeking behaviors in GMW and Kenema

	GMW		Kenema	
	%	95%CI	%	95%CI
Women attending at least four ANC*	62.8	53-73	84.8	81-89
Stillbirth in the last pregnancy	10.6	7-15	6.4	4-9
Use of family planning	15.0	10-20	25.4	20-30
Home deliveries	16.3	9-24	8.0	5-11

* AnteNatal Consultation

Types of fees paid in GMW and Kenema in percentage



Proportion of children vaccinated in GMW and Kenema

In GMW, 50.6% (95%CI(Confidence Interval): 46-55) of children were affected by fever in the previous 2 weeks while in Kenema, the fever affected 52.2% (95%CI: 46-58) of children.

Children health seeking behaviors in GMW and Kenema

	GMW		Kenema	
	%	95%CI	%	95%CI
Children affected by fever in the last 2 weeks	50.6	46-55	52.2	46-58
Care-givers sought treatment for fever	86.9	81-93	91.3	87-95
Children vaccinated against measles	48.5	41-57	60.3	54-66

Children were significantly less likely to be vaccinated against measles in GMW 48.5% (95%CI: 40.5-56.5) than in Kenema 60.3% (95%CI: 54.4-66.3).



RECOMMENDATIONS

Prioritizing women and children living in rural areas and the ones experiencing problems travelling the distance to the health facilities by strengthening the reference system, implementing maternity waiting home.

Decrease obstacles to access free healthcare by reinforcing the FHCI (Free Health Care Initiative), especially in urban settings.

Reduce missed opportunities for vaccination

Community-based initiatives: Strengthening the role of community health workers

Improve the quality of service for childbirth

Increase MOHS- employed health workforce at Primary care

CONCLUSION

Gaps in access to quality maternal healthcare continue to affect women, with such issues more pronounced in rural area.

Stillbirths in Kenema and GMW were seven times above the World Health Organization 2030 target.

Home delivery was much lower in our study than previously reported in national DHS in 2013.

Febrile illness for children was very prevalent and was not followed by healthcare seeking behaviour of the care-givers for half of the children.

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