

SKILLED BIRTH ATTENDANT SERVICES IN NEPAL

Overcoming barriers to utilization

AKADEMISK AVHANDLING

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Bishnu Prasad Choulagai

Fakultetsopponent: Professor Thorkild Tylleskär
Centre for International Health, Department of Global Public Health and Primary Care
University of Bergen, Norway

Avhandlingen baseras på följande delarbeten:

- I **Choulagai B**, Onta S, Subedi N, Mehata S, Bhandari GP, Poudyal A, Shrestha B, Mathai M, Petzold M, Krettek A.
Barriers to using skilled birth attendants' services in mid- and far-western Nepal: a cross-sectional study
BMC International Health and Human Rights 2013; 13:49.
- II Onta S*, **Choulagai B***, Shrestha B, Subedi N, Bhandari GP, Krettek A.
Perceptions of users and providers on barriers to utilizing skilled birth care in mid- and far-western Nepal: a qualitative study (*Shared first authorship)
Global Health Action 2014;7:24580.
- III **Choulagai BP**, Aryal UR, Shrestha B, Vaidya A, Onta S, Petzold M, Krettek A.
Jhaukhel-Duwakot Health Demographic Surveillance Site, Nepal: 2012 follow-up survey and use of skilled birth attendants
Global Health Action 2015; 8:29396.
- IV **Choulagai BP**, Onta S, Subedi N, Bhatta DN, Shrestha B, Petzold M, Krettek A.
A cluster-randomized evaluation of an intervention to increase skilled birth attendant utilization in mid- and far-western Nepal
Health Policy and Planning 2017; in press.



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Bishnu Prasad Choulagai

Department of Internal Medicine and Clinical Nutrition, Institute of Medicine,
Sahlgrenska Academy at University of Gothenburg

ABSTRACT

Background

Skilled birth attendants (SBAs) provide important services that improve maternal and newborn health and reduce maternal and newborn mortality. Utilization and coverage of SBA services reveal wide disparities between the rural and urban areas of Nepal.

Aims

This thesis aimed to identify the barriers to utilization of SBA services in Nepal and develop and test a community intervention to address those barriers for increasing the service utilization.

Methods

Mixed-methods research was applied to identify barriers to SBA service utilization followed by an intervention to address those barriers. Status of SBA service utilization and associated factors were investigated using cross-sectional surveys in rural settings of mid- and far- western Nepal and in an urban setting in the Jhaukhel-Duwakot Health Demographic Surveillance Site, Bhaktapur, Nepal. The qualitative study explored perceptions of service users and providers regarding barriers to SBA service utilization and suggestions to overcome those barriers. After identification of such barriers, we designed, implemented and evaluated a five-component community intervention. The intervention was designed as a cluster-randomized controlled trial involving a total of 36 Village Development Committees.

Results

Cross-sectional surveys showed that the utilization of SBA services at delivery was 48% in mid- and far- western Nepal and 93.1% in the JD-HDSS. Distance to a health facility and inadequate transport were major barriers to SBA service utilization. Similarly, inadequate knowledge of women and their families regarding the importance of SBA services and low prioritization of birth care hindered such utilization. Women's knowledge of danger signs of pregnancy and delivery and educational attainment were determining factors in SBA service utilization. Women who had completed at least four antenatal care (ANC) visits were more likely to use skilled birth care. Our one-year intervention was associated with increased use of skilled birth care services (OR = 1.57; CI: 1.19 – 2.08), however there was no significant association of the intervention with the use of ANC services.

Conclusions

There is an urgent need to increase the utilization of SBA services in rural areas of Nepal and to address the rural-urban gap in such utilization. An effective intervention for increasing SBA utilization includes mobilizing active community groups, improving service quality and physical infrastructure at health facilities, providing adequate SBAs at health facilities as well as implementing longer-term and repeated interventions. Community mobilization efforts are effective, however, such efforts require supervision and support to ensure quality of the implementation.

Keywords

Maternal health, newborn health, skilled birth attendant, implementation research, health services research, mixed-methods research, cluster-randomized controlled trial, evaluation, Nepal

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