

Primary Health Care (PHC), Maternal and Child Mortality in Nigeria: Issues and Implications.

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EXTENDED ABSTRACT

INTRODUCTION:

Maternal and child health status have become important indicators for socio-economic development as well as health of the people of a country. Good antenatal care can prevent major cause of neonatal and maternal mortality in Nigeria. No doubt Maternal and child health care are integral component of the Primary Health Care (PHC) system in Nigeria; many Nigerian women give birth without emergency services or trained personnel and about two-thirds of births in Nigeria occur at home. Nigeria's progress over the past five years in reducing maternal, infant and under-5 mortality rates has been very marginal. If the present trends continue it is unlikely that the country will achieve its maternal, newborn and child health-related Millennium Development Goals (MDGs) by 2015. Specifically, these goals envisage a three-quarter reduction in the maternal mortality ratio from 1000 in 1990 to 250 per 100,000 live births by 2015 and a two-third reduction in the under-5 mortality rate, from 230 per 1000 live births in 1990 to 77 by 2015 (FMOH, 2007). While about one million children die each year before their fifth birthday, an estimated 52,900 Nigerian women die annually from pregnancy related complications out of a global total of 529,000 maternal deaths. The coverage and quality of health care services in Nigeria continue to fail women and children through persistence low coverage of high impact interventions for maternal, newborn and childbirth. The local governments are directly responsible for the provision of primary health care services to the community with assistance from the state ministries of health. However, many of these centres are not functional due to several reasons and thereby not fulfilling the aims and objectives of establishing the PHC institution. The current scenario calls for community survey to examine the role of PHC and factors militating against the proper functioning of PHCs in Nigeria, particularly in providing maternal and child health care services to the communities in their jurisdiction.

OBJECTIVES:

The objectives of the paper include:

- To find out the socio-economic factors retarding the accessibility of primary health care services among the communities in the study area.
- To examine the influence of programme variables on primary health delivery services.
- To proffer policy recommendations to better health care delivery system.

METHODOLOGY:

The study covered all the 16 wards of Ado-Odo/Ota Local Government Area (LGA) in Ogun State, Nigeria. The methodology is based on extensive survey among all the PHCs in the local government area, from which data were collected and analysed through SPSS. Overall, 112 respondents were randomly selected from the sixteen wards in the Local government areas, seven (7) health personnel from each PHC. They were interviewed through face-to-face approach and focus group discussion with a two level analytical approach capturing both the qualitative data and information from the discussion segment. Also personal observation and inspection were equally employed in terms of personnel level of motivation, adequacy of staff, service delivery, environmental sanitation, maintenance culture, community involvement and adequacy of equipment. The survey data were analyzed statistically using statistical package for social sciences (SPSS) while information from the focus group discussions were transcribed and analyzed using content analysis. Pearson product moment correlation coefficient (r) coupled with the coefficient of determination (R^2) were incorporated to ascertain relationships, direction and the strength of the association between the variables of interest.

FINDINGS:

The regression analysis of the paper finds poor attitude of PHC workers, inadequate funding, poor supervision and lack of drugs and basic equipment ($p = .043, .025, .019$ and $.000$ respectively) among other factors inhibiting service delivery at the grassroots.

CONCLUSION AND RECOMMENDATIONS:

The paper has revealed the persistence malfunction in the delivery and management of health system in Nigeria, particularly the PHC. There is urgent need for all the three tiers of government to take active initiative in revamping the corner stone of our health care delivery system. The rejuvenation will be in area of adequate funding, procurement of drugs, consumables, equipment, skilled personnel, building and infrastructure to bring out the expected service delivery for which it was created. Thus, the paper recommends better health care delivery, more government commitment in terms of funding, adequate remuneration and effective awareness campaign.

Keywords: PHC, maternal, newborn, child health, MDGs.