

Skilled Birth Attendants Accepted at Home Deliveries in Bangladesh



A new mother who recently gave birth at home with her baby and the SBA who attended the delivery

Introduction

Ninety percent of deliveries take place at home in Bangladesh, but among the poorest 20% of Bangladeshis only 4% of births are attended by skilled health personnel. An NSDP survey shows strong support for the use of skilled birth attendants (SBAs) and willingness to pay for their services. Bangladesh's maternal mortality rate is currently 322 per 100,000 live births -one of the highest in the world. So widespread use of SBAs holds much promise in helping to meet the UN Millennium Development Goal of reducing the maternal mortality rate to around 140 by 2015. The survey results, which also indicate some barriers to SBA use, have enabled the design of an appropriate pilot intervention.

The Survey

In 10 communities 529 pregnant women, husbands and mothers-in-law were interviewed. In addition 10 focus group discussions and 60 in-depth interviews were held. Over 95% of respondents reported their willingness to pay Taka 300-500 (\$4.80 to \$8) for SBA service. Some respondents noted that at-home births are preferable because they cost less than clinic or hospitals births, and because women and families are more comfortable with at-home births.

But misconceptions were revealed too: respondents were neither fully aware of the need to prepare for obstetric emergencies nor did they know how to prepare for them. Some respondents thought that SBAs could handle any obstetric emergency, failing to understand that some complications require care at an emergency obstetric care facility.

Barriers

Several barriers to SBA use were identified, including the lack of availability of an SBA (mentioned by 38% of husbands who were surveyed). Some respondents were not convinced of the value of having an SBA at the birth (21% of husbands); some think SBAs are too expensive (17% of pregnant women); and some noted unease with the presence of a stranger at delivery (8% of pregnant women).

Solution

NSDP is piloting a project in the ten communities that participated in the survey to encourage the use of SBAs by using nurses/paramedics already working at NSDP Smiling Sun clinics. The program provides these staff with some additional training and other logistical support. The SBAs are then available to assist with deliveries at any time.

A communications campaign will address the reasons respondents gave for not using SBAs, and promote realistic expectations. It will outline the reality of obstetric emergencies and explain what steps to take when they occur. It will explain that the home-based SBA project will not be subsidized but will depend on financial support from the community.

Initiatives to promote birth preparedness and to develop community support and referral linkages are underway in most clinic catchment areas. NSDP aims to provide widespread emergency obstetric care eventually. But initially clinics where nurses/paramedics are already engaged in conducting home delivery will be prioritized for the phasing in of emergency care.