

# Completed worksheet for clarifying the problem – poor access to skilled attendance at delivery in Uganda

**Date:** 24 May 2011

**Country:** Uganda

## Background

Poor access to skilled attendance at delivery. Policy brief is intended to provide up-to-date research evidence on policy options and strategies on scaling up access to skilled birth attendance. The Ministry of Health has prioritised maternal and child health and is specifically working on interventions to improve skilled attendance at birth.

## Framing of the problem

Framing	Advantages	Disadvantages
1) Poor access to skilled attendance at delivery	<ul style="list-style-type: none"> <li>Description encompasses availability of services, skilled attendants, health facility capacity, consumer perceptions and preferences, etc.</li> </ul>	
2) Inadequate numbers and capacity of skilled birth attendants	<ul style="list-style-type: none"> <li>A recognised and important problem in the Ugandan setting</li> </ul>	<ul style="list-style-type: none"> <li>Narrow problem description</li> </ul>
3) Inadequate health facility capacity for obstetric care	<ul style="list-style-type: none"> <li>Precise for physical health facilities and services</li> </ul>	<ul style="list-style-type: none"> <li>A slightly broader description than (2) but not as comprehensive as (1); does not directly address access issues</li> </ul>

## Size of the problem

**MMR in Uganda is 430 per 100,000 live births (2008)**

<b>Year</b>	<b>Maternal mortality ratio (MMR)</b> (Per 100,000 live births)
2008	430
2005	510
2000	640
1995	690
1990	670

## Comparison with other countries

<b>Country</b>	<b>Year</b>	<b>Maternal Mortality Rate</b> (Per 100,000 live births)
<b>Regional comparisons</b>		
Uganda	2008	430
Kenya	2008	530
United Republic of Tanzania	2008	790
Rwanda	2008	540
Burundi	2008	970
South Africa	2008	410
<b>Northern country comparisons</b>		
Sweden	2008	5
United Kingdom	2008	12
United States of America	2008	24
Source: WHO, UNICEF, UNFPA, World Bank Maternal Mortality Estimation Inter-Agency Group, 2008(4)		

## Underlying factors

A number of factors hinder expectant mothers from accessing care at health facilities where skilled attendance could be available for their care. These are grouped as provider factors, consumer factors, and infrastructural factors.

## Frameworks used

Graham WJ, Bell JS, Bullough CH. *Can skilled attendance at delivery reduce maternal mortality in developing countries?* Studies in Health Services Organisation and Policy. 2001(17):97-130.

Lee ACC, Lawn JE, Cousens S, et al. Linking families and facilities for care at birth: What works to avert intrapartum-related deaths? *International J Gyn Obs* 2009; 107: S65–S88

### **Needs for evidence and search strategies**

Preferably systematic review of intervention effects. Both electronic searches and searches for grey literature, unpublished data, national reports. Free text and index terms for 'skilled birth attendants/attendance, maternal morbidity, maternal mortality, child mortality'

### **Potential solutions (options)**

1. Maternity waiting homes
2. Institutionalising deliveries at health centre level IIs
3. Working with the private sector to institutionalise deliveries at health centre level IIs