Strategies to improve postnatal services in Lesotho

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Date of submission:  November 2014.
DECLARATION

I declare that this dissertation hereby submitted by me for the M. Cur in Health Science Education at the Potchefstroom Campus of the North-West University is my own independent work and has not previously been submitted by me at another university. I further more concede copyright of the dissertation in favour of the North-West University.

Signed:........................

Date: 22/04/2015
DEDICATION

This work is dedicated to my husband Motebang and our children, Thabelo, Lisema and Napo. Their love, support and encouragement gave me strength throughout my years of this study.

I want to thank my mother who was always there for me and praying tirelessly for me, and finally to all women who willingly shared their experiences with me.
ACKNOWLEDGEMENTS

I wish to express my heartfelt appreciations to everybody who contributed to the success of this study. My deepest acknowledgments are directed to the following people who played a significant and important role in all steps of my research journey:

My sincere gratitude goes to my supervisor Dr C.S. Minnie. She has been a source of inspiration throughout my years of study. Her support and patience with me, sometimes working extra hours to guide me with my academic work has made me proud of her. She has been my mentor as a professional midwife and nurse. Thank you so much and may God almighty bless you more and more.

I thank the North-West University Human Research Ethics Committee for granting me permission to undertake this study. I would not have been able to conduct this study without your permission.

My sincere thanks go to my sponsor who made it possible for me to continue with my study, may you extend this offer not just to me but to more other unprivileged students. I am also grateful for the Bursary from NRF (Thutuka).

I would like to thank the Lesotho Ethical Committee, through the office of The Director General of Health Services of the Ministry of Health, for granting me permission to conduct research in Lesotho.

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and your lived experiences and perceptions enlightened me. Informants and colleagues once again, thank you.

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I thank my English editor Mr Tankie Khalanyane for copy editing my study.

Finally, I would like to thank Almighty God for protecting me and providing good and healthy life that allowed me to continue and finish this study.
ABSTRACT

Keywords: Postnatal care, women, midwives, experiences, strategies, Lesotho,

Background: The study described the perspectives and experiences of women and health care providers with regard to use of postnatal care and reasons why some women do not attend postnatal care in order to identify strategies for improving postnatal care services.

Methods: An explorative, descriptive, and contextual research design was used. In step one data was collected with semi-structured interviews with seventeen (17) women who attended postnatal care. The second sample consisted of ten (10) women who did not attend postnatal care but brought their babies for well-baby clinic. Focus groups were conducted with midwives who offered postnatal care to women. The midwives of the first focus group worked in the hospital while the second focus group worked at a filter clinic.

Results: In step one, some women indicated positive experiences but most women had negative experiences about postnatal care. The positive experiences were related to the satisfaction of the women with good services received and not encountering problems with staff's care. Common concerns mentioned in step one and two about postnatal care were shortage of skilled midwives, need for staff to be trained on postnatal care services, lack of confidentiality, poor infrastructure and non-integration of maternal and child services. Reasons for not attending postnatal care that were mentioned by women in step three were inaccessibility of the health care facilities, poor roads infrastructure, lack of knowledge about postnatal services and socio-cultural factors.

Conclusion: Based on the findings, strategies to improve postnatal care were developed: Firstly, the midwives need to be trained on postnatal care and highlighted on current postnatal policies and guidelines. Secondly, woman and baby should attend the postnatal care at the health facility. Thirdly, community health nurses and trained community health workers should visit the women at home soon after birth of the babies. Fourthly, postnatal care should be provided at the family and community level by a trained and skilled midwife during the early postnatal period. Fifthly, combination of care facility and home visit - when the woman and baby are discharged from the hospital, follow-up need to be done at home by the midwife. Lastly, a comprehensive integration of postnatal services with other programmes needs to be enforced and supported by the programme management and policy makers.
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<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
</tr>
<tr>
<td>ANC</td>
<td>Antenatal care</td>
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<tr>
<td>HIV</td>
<td>Human Immune deficiency Virus</td>
</tr>
<tr>
<td>HR</td>
<td>Human Resource</td>
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<tr>
<td>ICM</td>
<td>International Confederation of Midwives</td>
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<tr>
<td>LDHS</td>
<td>Lesotho Demographic and Health Survey</td>
</tr>
<tr>
<td>MCHC</td>
<td>Maternal Child Health Care</td>
</tr>
<tr>
<td>MOH</td>
<td>Ministry of Health</td>
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<tr>
<td>MOHSW</td>
<td>Ministry of Health &amp; Social Welfare</td>
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<tr>
<td>MNCH</td>
<td>Maternal Neonatal Child Health</td>
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<tr>
<td>NICE</td>
<td>National Institute for Health and Clinical Excellence</td>
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<tr>
<td>PMTCT</td>
<td>Prevention of Mother to Child Transmission</td>
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<tr>
<td>PNC</td>
<td>Postnatal care</td>
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<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<td>United Nations Children's Fund</td>
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<td>WHO</td>
<td>World Health Organization</td>
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