

**FACTORS CONTRIBUTING TO ATTENDING TRADITIONAL BIRTH ATTENDANTS AMONG
PREGNANT MOTHERS AGED 18-45 YEARS IN DRANYA SUB-COUNTY, KOBOKO DISTRICT: A
CROSS SECTIONAL STUDY.**

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Page | 1 **Abstract**

Background

The study was to determine factors contributing to attending traditional birth attendants among pregnant mothers aged 18-45 years in the Dranya sub-county, Koboko district.

Methodology

The study employed a descriptive cross-sectional design; a Convenience sampling technique was used. Data was collected on a sample size of 50 respondents. A semi-structured questionnaire with closed and open-ended questions in different sections of A, B, C, and D was used as a data collection tool. The study population was pregnant mothers aged 18-45 years.

Results

The study findings on factors contributing to attending traditional birth attendants among pregnant mothers aged 18-45 years showed that (72%) of the respondents believe in TBAs, (76%) of the respondents agreed that the TBAs are friendly to them, (64%) of the respondents are in polygamous marriages, (92%) of the respondents agreed that the services provided by TBAs are cheap and affordable, (90%) of the respondents reported that maternity services provided by the maternity service providers are not friendly and (68%) reported that they are not affordable.

Conclusion

The researcher concluded that the findings of the study were attributed to TBAs being friendly to pregnant mothers, availability and accessibility of TBAs in their communities, being in polygamous marriages, being gravid mothers, cheap and affordable services offered by TBAs, expensive costs of maternity services at the health facilities.

Recommendations

The researcher recommended that: the government should construct health facilities in their communities so that pregnant mothers can access the services. The Ministry of health should empower the Village Health Team to educate pregnant mothers and create awareness about the importance of attending maternity services from health facilities provided by the well-trained health care provider.

Keywords: *Traditional Birth Attendants, Pregnant Mothers, Dranya Sub-County, Koboko District.*

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Background of the study

In Uganda where 1.5 million women give birth every year, there are approximately 1500 well-trained midwives to assist in childbirth process services. Some traditional birth attendants may be limited to social support while others provide full antenatal care (Emmanuel Benon Turinawe,

2016) In Uganda, nearly 3 in 4 births (73%) are delivered in a health facility, primarily in the public sector, still one in four births delivered at home (survey, 2016). Unskilled birth attendance is a public health issue associated with maternity mortality and morbidity around the world. The deliveries that take place at home and are assisted by TBAs are often performed in unsafe and unhygienic conditions resulting in increased risk of maternal and child morbidity and mortality (Shahab Uddin Howlader, 2018). In the

Bubaare sub-county, research showed 80% of pregnant mothers attended antenatal care services and only 13.7% managed to come for delivery in the healthy facility for the year 2015-2016 despite the efforts of the Ministry of Health through recruiting midwives, nurses who play a role in educating mothers about antenatal care, hospital deliveries (Malic Rutindangyezi, 2022). Therefore, this study focused on factors contributing to attending traditional birth attendants among pregnant mothers aged 18-45 years in Dranya sub- County, Koboko district.

This study aims to assess the factors contributing to attending Traditional Birth Attendants among pregnant mothers aged 18-45 years in the Dranya sub-county, Koboko district.

Methodology

Study design.

A descriptive cross-sectional study design was carried out. This is because the study did not require follow-up of clients over some time. The information required was collected once from the study participants.

Study area.

The study was conducted in Dranya Sub-county, Koboko District, Uganda.

Study population.

The study targeted pregnant mothers aged 18-45 years.

Sample size determination

A sample size of pregnant mothers aged 18-45 years was determined using the Burton's formula given below.

$S=2(QR) O$:

Where:

S=required sample size

Number of days the researcher spent collecting data

10

Maximum number of pregnant women per day

Maximum time the researcher spent on each participant

$2*5*10*0.5hr$

=50

Therefore, the researcher used 50 respondents.

Sampling technique

A convenience sampling technique was employed. This enabled data collection without bias and it also saved time.

Sampling procedure

The sample of participants was obtained using a convenience sampling technique where pregnant mothers aged 18-45 years attending TBAs were selected based on first come, first serve until the 50th person.

Data collection method

The study employed a quantitative data collection method. Using this method, the researcher asked questions to collect sets of facts and figures by using questionnaires

Data collection tool

A questionnaire was used as a research instrument to collect the primary data. The questionnaire had open-ended and closed-ended questions that the respondents were asked to fill in upon being informed about the study. Questionnaires were easy to administer, quick at collecting the data, and less expensive while collecting the data.

Data collection procedure

The letter was first got from Kampala School of Health Sciences seeking permission to be granted at Dranya sub-county, and then taken to the District Health Officer of Dranya sub-county who gave me the permission to go on and carry out my research study. Then consent was obtained from pregnant women by voluntarily signing the consent form, and then information was obtained from pregnant women by using questionnaires.

Study variables

The dependent variable was the increased cases of pregnant mothers aged 18-45 years attending to TBAs. The Independent variable was the individual, health, and community-related factors.

Quality control

Pre-testing the research tool

The researcher pre-tested the questionnaire before giving it to participants. The pretest was done in Ombachi sub-county using 10 respondents selected randomly and data was analyzed to find feasibility of the study and validity of the data.

Training of research assistants

Two research assistants were trained on how to fill out the questionnaires by the researcher herself.

Inclusion criteria

All pregnant mothers aged 18-45 years attending TBAs who consented and accepted to participate in the study. Those who were available at the time of study and those who were feeling fine

Exclusion criteria

Pregnant mothers aged 18-45 years who had never attended TBAs were not accepted to participate in the study. Those who were busy and those who were very sick and were seeking treatment

Data analysis and presentation

The collected data was summarized on paper using a pen, tallied, and analyzed using Microsoft Excel program and then presented in the form of pie charts bar graphs and tables to address each study objective.

Ethical considerations

A letter meant to introduce the researcher to the District Health Officer was received from Kampala School of Health Sciences. She asked for permission to conduct the study and when granted permission, she made sure respondents consent first using an assigned or thumbprint. The identities of the respondents were silent features in the study. Each individual was interviewed alone and the information was not disclosed to colleagues.

Table 1: Shows distribution of respondents according to biodata
 (N=50)

Variables	Frequency(f)	Percentage (%)
Age(years)		
18-24	08	16
25-31	14	28
32-38	24	42
39-45	07	14
Total	50	100
Religion		
Catholic	15	30
Anglican	10	20
Muslim	12	24
Born again	10	20
Others(specify)	03	06
Total	50	100
Tribe		
Kakwa	25	50
Lugbara	15	30
Madi	07	14
Others(specify)	03	06
Total	50	100
Occupation		
Peasant	23	46
House wife	15	30
Civil servant	06	12
Self employed	02	04
Others(specify)	04	08
Total	50	100
Marital status		
Married	34	68
Single	09	18
Divorced	05	10
Widowed	02	04
Total	50	100
Level of education		
Primary	20	40
High school	10	20
Tertiary/University	5	10
Never went to school	15	30
Total	50	100

Results

Bio data

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From the study conducted, (16%) of the respondents were aged 18-24 years, (28%) of respondents were aged between 25-38 years, (42%) of the respondents were aged between 32-38 years, (14%) of the respondents were aged between 39-45 years. (30%) of the respondents were Catholics, (20%) of the respondents were Anglicans, (24%) of the respondents were Muslims, (20%) of the respondents were Born Again, (06%) of the respondents were from other religions. (50%) of the respondents were Kakwa, (30%) of the respondents were Lugbara, (14%) of the respondents were Madi, (6%) of the respondents were from other tribes. (46%) of the respondents were peasants, (30%) of the respondents were house wives, (12%) of the respondents were civil servants, (04%) of the respondents were self-employed, (08%) of the respondents were from other occupations. (68%) of the respondents were married, (18%) of the respondents were single, (10%) of the respondents were divorced, (04%) of the respondents were widowed. (40%) of the respondents were primary leavers, (20%) of the respondents were high school leavers, (10%) of the respondents were tertiary/university leavers, (30%) of the respondents were never in school.

Community related factors contributing to attending traditional birth attendants among pregnant mothers aged 18-45 years in Dranya sub-county, Koboko district

From the figure, majority of the respondents (76%) reported that TBAs are friendly while minority of the respondents (24%) reported that they are not friendly. From the table, majority of the respondents (60%) reported that they move distances that are less than 1km from their homes to the nearest TBAs whereas minority (04%) reported that they move distances greater than 4km to the TBAs. From the table, the most of the respondents (56%) reported having beliefs about child delivery from TBAs whereas the least of the respondents (44%) reported not having beliefs about TBAs. From the figure, majority of the respondents (64%) reported that they are in a polygamy marriage while minority of the respondents (36%) reported being in a monogamy marriage. From the figure, majority

of the respondents (96%) reported that TBAs are available in their community whereas minority of the respondents (04%) reported that they are not available.

Individual factors contributing to attending traditional birth attendants among pregnant mothers aged 18-45 years in Dranya sub-county, Koboko district

From the table, majority of the respondents (68%) reported that decisions are made by wives about place of delivery while minority of the respondents (32%) reported that decisions are made by their husbands about place of delivery. From the figure, majority of the respondents (74%) reported that delivery is not a normal process whereas minority of the respondents (26%) reported that delivery is a normal process. From the table, majority of the respondents (82%) reported being multi-gravid mothers while minority of the respondents (18%) reported being prime gravid mothers. From the figure, majority of the respondents (92%) reported that services provided by TBAs are cheap and affordable while minority of the respondents (08%) reported that the services are not cheap and affordable.

Health related factors contributing to attending traditional birth attendants among pregnant mothers aged 18-45 years in Dranya sub-county, Koboko district

From the figure, majority of the respondents (68%) reported not using maternity services at the health facility whereas minority of the respondents (32%) reported using maternity services at health facility. From the table, majority of the respondents (72%) reported that maternity services are not affordable at the hospital while minority of the respondents (28%) reported that maternity services are affordable. From the table, majority of the respondents (80%) reported that they take long hours (over 2 hours) to receive maternity services when they get to the health facility while the minority of respondents (04%) reported that they take less hours (30-1 hours) to receive maternity services. From the figure, the majority of the respondents (90%) reported that maternity health providers are not friendly while the minority (10%) reported that they are friendly.

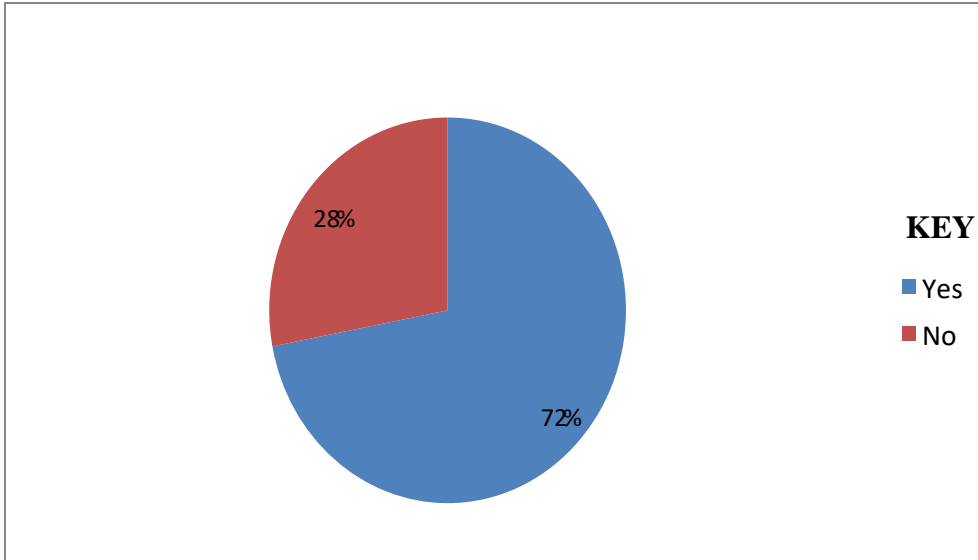


Figure 1: Shows distribution of respondents according to whether they believed in TBAs

Figure 2: Shows distribution of respondents according to whether TBAs are friendly.

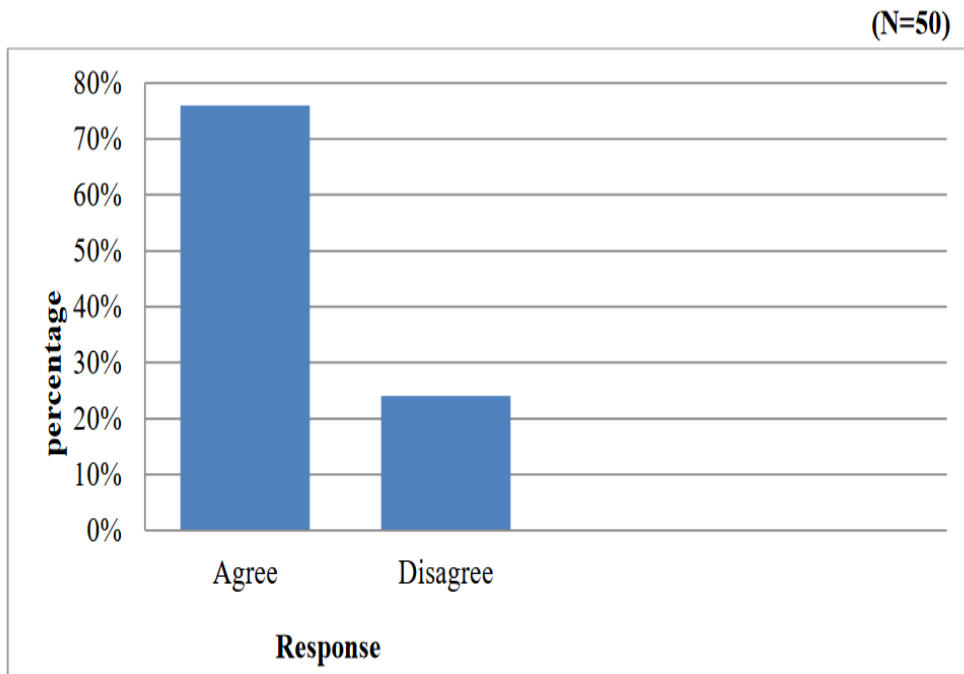


Figure 3: Shows distribution of respondents basing on the distance from their homes to any nearest TBAs.

(N=50)

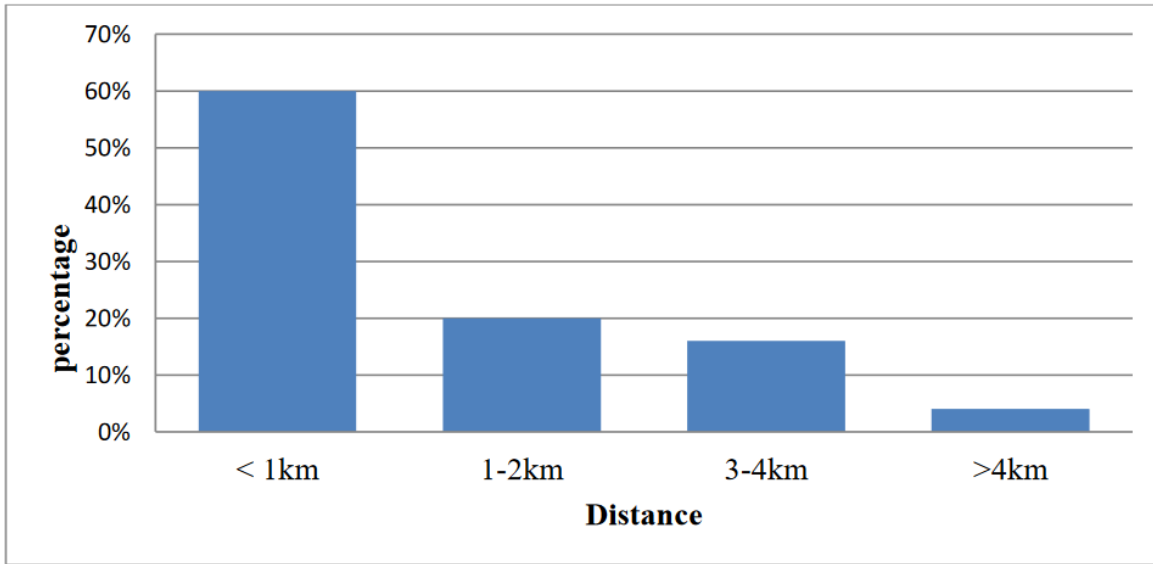


Table 2: Shows distribution of respondents according to whether they have beliefs about child delivery from TBAs.

(N=50)

Response	Frequency(f)	Frequency (%)
Yes	28	56
No	22	44
Total	50	100

Figure 4: Shows distribution of respondents basing on the type of marriage.

(N=50)

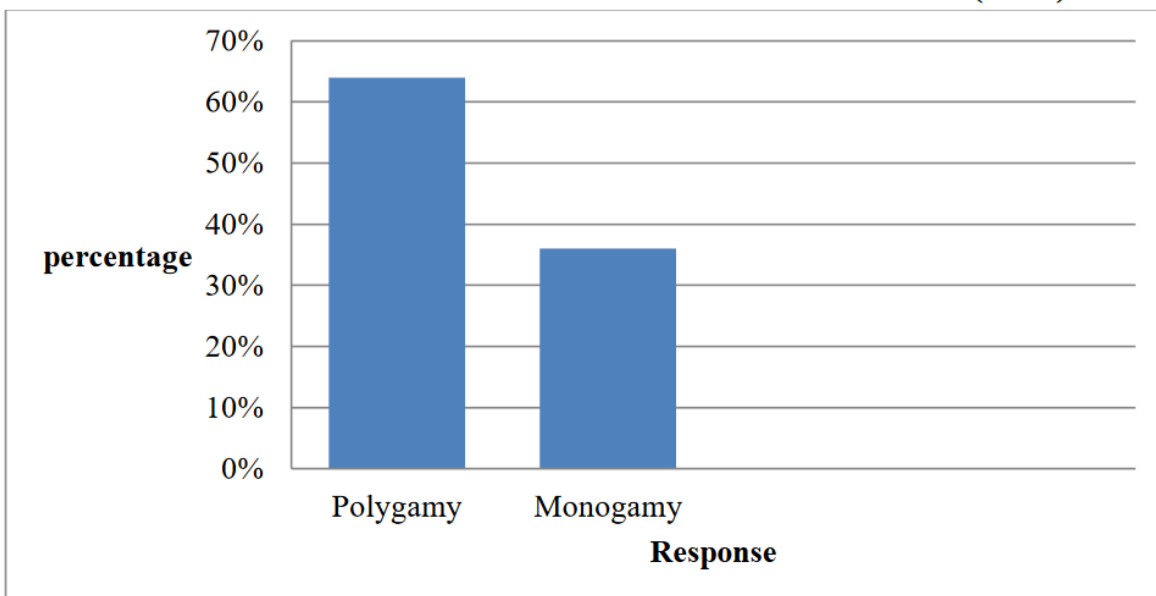


Figure 5: Shows distribution of respondents according to whether TBAs are available in the area. (N=50)

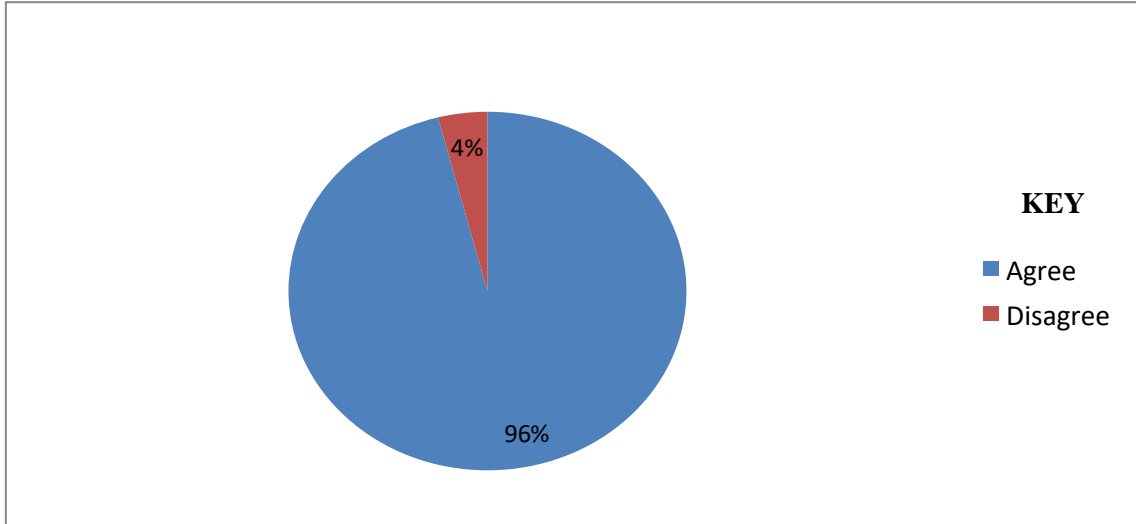


Table 3: Shows distribution of respondents basing on who makes the decisions about place of birth. (N=50)

Response	Frequency(f)	Percentage (%)
Husband	16	32
Wife	34	68
Total	50	100

Figure 6: Shows distribution of respondents according to whether they consider delivery as a normal process? (N=50)

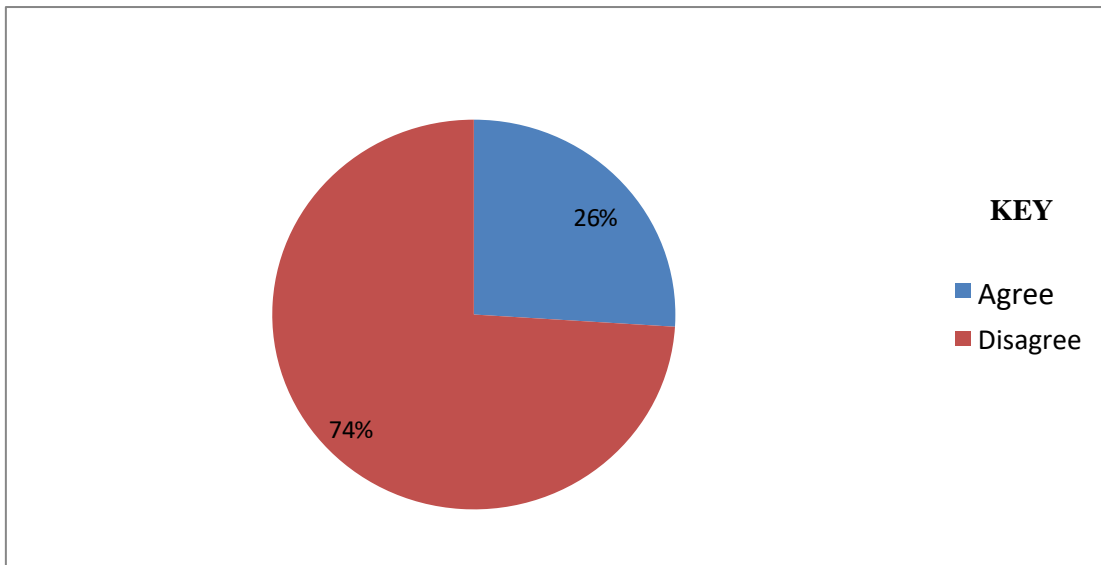


Table 4: Shows distribution of respondents according to gravidity.

(N=50)

Gravidity	Frequency(f)	Percentage (%)
Prime gravid	09	18
Multi- gravid	41	82
Total	50	100

Figure 7: Shows distribution of respondents according to whether the services provided by TBAs are cheap and affordable.

(N=50)

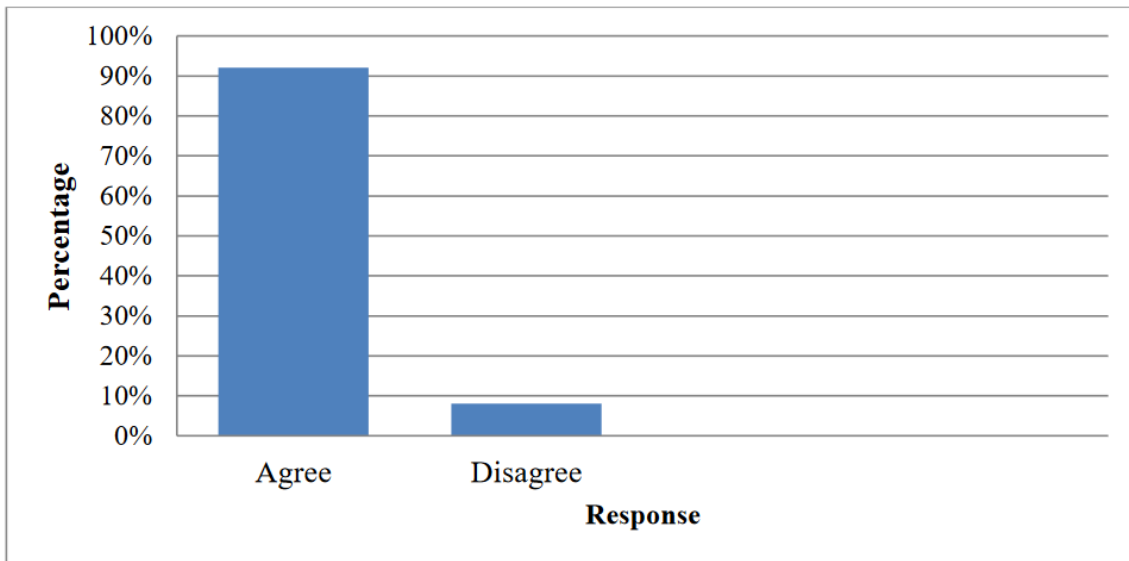


Figure 8: Shows distribution of respondents according to whether they use maternity services at the health facility.

(N=50)

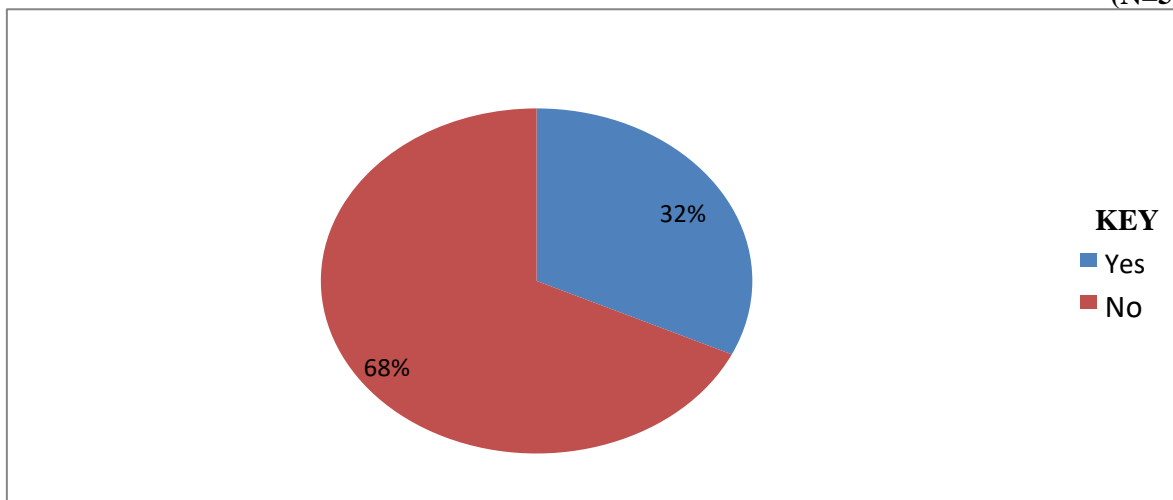


Table 5: Shows distribution of respondents according to whether maternity services are affordable when you get to the health facility.

(N=50)

Response	Frequency(f)	Percentage (%)
Affordable	14	28
Not affordable	36	72
Total	50	100

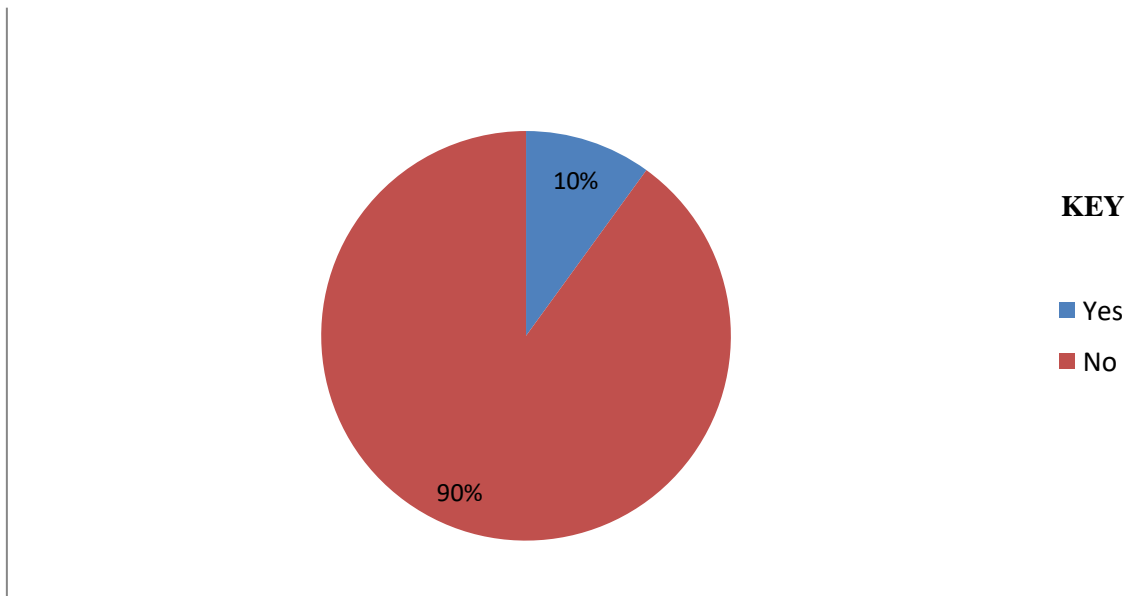
Table 6: Shows distribution of respondents basing on the time they take to receive maternity services when they get to the health facility.

(N=50)

Time	Frequency(f)	Percentage (%)
< 30 minutes	00	00
30-1hour	02	04
1-2hours	08	16
Over 2 hours	40	80
Total	50	100

Figure 9: Shows the distribution of respondents according to whether the maternity service providers are friendly.

(N=50)



Discussion

Community-related factors contributing to attending traditional birth attendants among pregnant mothers aged 18-45 years in the Dranya sub-county, Koboko district.

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Given the study findings, the majority (72%) of the respondents reported that they believed in TBAs whereas a minority (28%) of the respondents reported that they did not believe in TBAs. This was in agreement with the study done by MT et al, (2016) which showed that (78.5%) of the respondents were of the view that women believe in them. This is because TBAs are believed to be more experienced and have a wide understanding of the needs of women during childbirth.

According to the study findings, the majority (76%) of the respondents agreed that the TBAs are friendly to them thus increasing their attendance to TBAs. This is because TBAs reside within their communities and have built a strong understanding and friendship with the mothers.

Based on the distance from their home to any nearest TBAs, the majority of the respondents reported that they move a distance of less than one kilometer to the TBA's home making them readily available and accessible. This was in agreement with a study done on factors associated with home deliveries by Sinkamba et al, (2019) which showed that traditional birth attendants were available in their area of residence increasing women's attendance to them for delivery.

In addition to that, most (56%) of the respondents reported having beliefs about child delivery from TBAs. This is because the TBAs not only help them deliver but also pray for them after delivery and most of them perceive it as a blessings hence having an impact on the choice of mothers on the place of delivery.

Lastly, the Majority (64%) of the respondents reported being in polygamous marriages. This was in agreement with a study done by Rodgers O et al, (2016) who revealed that being in a polygamist marriage was associated with a high risk of delivering at home with TBAs. This is attributed to the economic status of the families where husbands cannot afford the maternity services offered by the health facility.

Individual factors contributing to attending traditional birth attendants among pregnant mothers aged 18-45 years in the Dranya sub-county, Koboko district.

From the study findings, the majority of the respondents (68%) reported that husbands did not have any impact on decision-making about their place of delivery. This was in

disagreement with a study done on social-cultural factors of gender roles in women's healthcare utilization by Dominic Azuh et al, (2015) which revealed that husbands exercise an overwhelming proportion (72.7%) in the affairs of household activities hence making decisions about place of delivery. According to the study findings, the majority (74%) of the respondents reported that they do not consider the delivery process as a normal process. This is because many deaths have occurred during the delivery process. However, their choice of delivery from home and TBAs is influenced by other factors.

Also, the majority (82%) of the respondents reported being multi-gravid mothers and hence has experience. This was in agreement with a study done on factors influencing deliveries by Sarah et al, (2018), which revealed that the status of women's health of birth experience has an impact in choosing a home as a birth location. In addition to that, the majority of the respondents (92%) agreed that the services provided by TBAs are cheap and affordable thus increasing the number of pregnant women attending TBAs for delivery since their financial status is not stable. This was in agreement with a study done on the reasons why mothers prefer going for TBAs other than other healthy facilities by Eria et al, (2017) which revealed that TBAs offer cheap services that everyone can afford.

Health facility-related factors contributing to attending traditional birth attendants among pregnant mothers aged 18-45 years in the Dranya sub-county, Koboko district.

In regards to the study findings, the majority (68%) of the respondents reported not using maternity services at the health facility. This is attributed to long distances, unavailability of health facilities within their communities, and community unawareness about the importance of health services especially during pregnancy.

According to the study findings, the Majority (72%) of the respondents reported that the maternity services at the health facility are not affordable hence influencing their choice of delivery from the TBAs. This is in line with a study done on factors associated with healthy facility deliveries among mothers by Richard K Mugambe et al, (2021) which reported that one of the reasons for non-facility deliveries was the high cost of hospital delivery.

Also, the majority of the respondents (80%) reported that they take over 2 hours to receive maternity services at the health facility. This is attributed to unfriendly health workers who are characterized by negative attitudes, unresponsiveness, and unsupportiveness. And this influences their choice of delivery from TBAs because of their experience in the hospital.

Lastly, the majority (90%) of the respondents reported that the maternity service providers are not friendly to pregnant

mothers and in so doing, they mistreat and abuse them hence their decisions to deliver from homes and TBAs. This is in line with a study done on reasons for home delivery and the use of traditional birth attendants by Sialubanje et al, (2015) which showed that mothers were mistreated, and abused by nurses or midwives, and so they tend to resort to home child delivery with the help of TBAs than going back to such unfavorable environment.

Conclusion

There is still a high population of pregnant mothers who attend TBAs. The factors contributing to attending TBAs included pregnant mothers believing in TBAs, TBAs being friendly to pregnant mothers, availability and accessibility of TBAs in their communities, having beliefs about child delivery from TBAs, being in polygamous marriages, being multi-gravid mothers, cheap affordable services offered by TBAs, expensive costs of maternity services at the health facilities, unavailability of health facilities nearby the communities, unfriendly maternity health care providers who are unresponsive and unsupportive to pregnant mothers, especially at the time of delivery

Recommendation

The researcher recommended that the government should construct health facilities in their communities so that pregnant mothers can access the services. The Ministry of Health should empower the Village Health Team to educate pregnant mothers and create awareness about the importance of attending maternity services from health facilities provided by well-trained healthcare providers. Health workers should acknowledge their duties and build in themselves a sense of humanity to serve mankind perfectly without harm. However, the study was conducted in one sub-county on a small sample, the research therefore recommended further studies of indifferent areas to close the research gaps

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List of Abbreviations

AIDS: Acquired Immune Deficiency Syndrome
 ANC: Antenatal Care
 HIV/AIDS: Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
 HPV : Human Papiloma Virus
 MCH: Maternal and Child Health
 MMR: Maternal Mortality Rate
 MoH: Ministry of Health
 PMTCT: Prevention of Mother –To- Child Transmission
 PPH: Post-Partum Hemorrhage
 SBA: Skilled Birth Attendant
 TBAs: Traditional Birth Attendants
 UNICEF: United Nations International Children's Emergency Fund
 WHO: World Health Organization
 LC: Local council

Source of funding

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Conflict of interest

The author had no conflict of interest.

Author Biography

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References

1. Dominic Azuh, O. F. (2015). Social-cultural factors of gender roles in women's healthcare utilization (Vol. 3(04)). Open journal of social sciences.
2. Emmanueil Benon Turinawe, J. T. (2016). Traditional birth attendants (TBAs) as potential agents in promoting male involvement in maternity preparedness: insights from a rural community in Uganda (Vol. 13). Uganda: BMC Reproductive Health.

3. Eria, M. (2017). Factors influencing utilization of traditional birth attendants by mothers in Mufubira su- county, Jinja District. Kampala International University, School of Allied Health Sciences.
4. Malic Rutindangyezi, N. S. (2022). Factors contributing to attending Traditional Birth attendants among pregnant mothers aged 18-45 years in Bubaare SubCounty, Mbarara District A cross sectional study (Vols. 3(6),16). Uganda: Student's Journal of Health Research Africa.
5. MT, O. C. (2016). Percieved factors influencing the utilization of traditional birth attendants' services in Akinyele local Government, Ibanda, Nigeria. Nigeria: Journal of community medicine and primary health care.
6. Richard K Mugambe, H. Y. (2021). Factors associated with health facility deliveries among mothers living in hospital catchment areas in Rukungiri and Kanungu districts, Uganda (Vol. 21). BMC Pregnancy and child birth.
7. Shahab Uddin Howlader, A. R. (2018). Rate of home delivery and participation of traditional birth attendants is declining in selected areas of Dhaka city (Vol. 7(2)). MOJ Public Health.
8. Sialubanje Cephas, M. K. (2015). Reasons for home delivery and use of traditional birth attendants in rural Zambia (Vol. 15). BMC Pregnancy and child birth.
9. Sinkamba, T. (2019). Factors associated with home deliveries in Katondwe, Luangwa district.
10. Womens Health Science Journal.

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