



CASE STUDY

From Traditional Birth Attendant to Health Facility

Lagos • September 2012



Mrs. Temitope James waiting to see the doctor in Delta Crown Hospital, Ogudu

“I used to go to all those herbal people. Then on that day at the community outreach, they taught us a lot about how to take care of our body, how to maintain our pregnancy, and the danger signs in pregnancy. So that is what made me come here.”

Mrs. Temitope James, 22, sat in the patients' chair in the doctor's office. She wore an elegant blue top embroidered around the neck and down the front with white thread. Her hair was worn in corn-row braids. She looked the picture of style—and of health. Six months pregnant with her first baby, she played absently with her ante-natal registration card as she spoke. She had been married for about a year.

Mrs. James had attended the two Facility Community Outreaches (FCOs) that PATHS2 had held in the Ogudu community in Lagos in April and June 2012, to encourage members of that community to go to the Delta Crown private hospital within the area when they needed health care. Delta Crown is one of six private hospitals that PATHS2 partners with to provide health care to patients at a 50% discount when the patient can't afford to pay full price.

The private hospitals are chosen for the partnership because of their location and their willingness to participate. Under the partnership, which is guided by a Memorandum of Agreement (MoA), PATHS2 provides an initial stock of drugs and some equipment from the national essential drugs list. The private hospitals in turn charge patients only half the normal fee, after having established (through research in the community) that the patient can't afford to pay the entire cost. This way, patients can choose to seek good-quality health care at affordable rates, instead of going to Traditional Birth Assistants (TBAs) or patent medicine vendors.

The closest public primary care facility in the community where Delta Crown is located is about a kilometre away—not that far, but too far in an emergency for someone without access to a motorcycle or car.

Mrs. James says that when she found out she was pregnant, her mother took her to a TBA, and she kept going to him for antenatal care (ANC) until she attended the first FCO in April. She was four months pregnant at that outreach, but didn't register for ANC with Delta Crown immediately, because she had to travel out of the area for a couple of months. When she returned in June, she heard that a second FCO was going to be held, and attended it, after which she registered with Delta Crown at once.

Mrs. James said that some pregnant women prefer TBAs (whose services are not free either) because they believe that all the herbs they get from the TBAs will make them feel strong. She herself has no plans of going back to the TBAs, because she is sure she is in safer hands with the hospital. She added that knowing what she learnt during the FCOs makes her feel more secure than having to rely on a TBA for advice and information. Moreover, she likes the attention she receives from the health workers at Delta Crown.

Mrs. James's mother doesn't mind that Mrs. James has stopped going to the TBA she had set her up with—instead, she is happy that her daughter now has information on her own health to work with as a result of the FCOs.

Traditional health providers like TBAs are a recognised, substantial source of health care in Lagos State, and in some rural communities the reliance on TBAs is especially high. In Ibeju-Lekki, for instance, eight of every 10 pregnant women would prefer to give birth under the care of a TBA—but most of the children referred to the General Hospital in Ibeju-Lekki from TBAs died of neonatal tetanus as a result of the unsanitary conditions in which they entered the world.

PATHS2 is working with the Local Government Health Authority in Ibeju-Lekki to orient registered TBAs on safe and hygienic health practices, while it works with the community to change the health-seeking behaviour of patients through health education activities such as the FCOs.

As a way of building the capacity of TBAs on maternal and child health, the Lagos State Government has on-going six-week training for TBAs, which includes an emphasis on referral and the need to refer at the appropriate time, before it is too late.

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The Partnership for Transforming Health Systems Phase Two (PATHS2) is a six-year development initiative that aims to ensure Nigeria achieves important health-related Millennium Development Goals.

Funded by UKAID from the Department for International Development, PATHS2 is working in partnership with the Government of Nigeria and other stakeholders to improve the planning, financing, and delivery of sustainable health services for those most in need. In addition to its work at the Federal level, the PATHS2 programme is implemented in the five states of Enugu, Jigawa, Kaduna, Kano, and Lagos. PATHS2 follows the successful PATHS programme, which was implemented from 2002 to 2008.

PATHS2 is managed by Abt Associates, in association with Options, Mannion Daniels, and the Axios Foundation.



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