

Knowledge of neonatal danger signs, care seeking practices and associated factors among mothers with newborns admitted at Mwananyamala Regional Referral Hospital in Dar es Salaam Tanzania.

Karoma, Karungi J. (2021)

Abstract:

Background:

The problem of poor medical care seeking behavior is highly prevalent all over the world particularly in low and middle-income countries. Tanzania is among the countries with a high neonatal mortality rate but with limited data on mothers' knowledge on neonatal danger signs, medical care seeking practices and the contributing factors.

Objective:

The broad objective of this study is to determine the knowledge of neonatal danger signs, care seeking practices and the associated factors among mothers with newborns admitted at Mwananyamala Regional Referral hospital in Dar es Salaam, Tanzania. Methodology: This was a cross-sectional analytical study design conducted at Mwananyamala regional referral hospital in Dar es Salaam, Tanzania. The study included all mothers whose newborns were admitted in the hospital for medical care during the study period (March to May 2021). A Chi-square test was used to study the relationship between the independent variables and the outcome variable (medical seeking behavior) at 5% significance level. A well-constructed structured questionnaire was used to collect data. Data analysis was done using SPSS 23.0. Both bivariate and multivariate analysis were employed to determine the associations between independent and study outcome variables. A 95% CI was used to measure the statistical association. Findings are presented using tables and figures.

Results:

Three hundred and eight mothers with neonates admitted at Mwananyamala Regional Referral Hospital in Dar es Salaam were enrolled in the study. The mean age of the participants was 26.6 years and standard deviation 5.9 years. 259 (84%) of the mothers were found to have poor knowledge on neonatal danger signs, although the majority 258(84%) of mothers were found to have a positive attitude towards medical care services provided in the health facilities. Medical care seeking behavior was inappropriate among the majority of mothers included in this study. Only 121 out of 308 (39.3%) were appropriately taking their children to hospital in a timely manner for medical care when noticing neonatal danger signs. The proportion of appropriate care seeking practices was high among participants who have health insurance 75% versus 36.8% (χ^2 : 11.438, $p=0.001$), among those with positive attitude 44.6% vs 12% (χ^2 : 18.631, $p<0.0001$) and these relationships were statistically significant. After adjustment, the variables that were significantly associated with appropriate medical care seeking practices were having health insurance [AOR: 5.58, 95%CI: (1.7517.84), $P=0.004$]; and having a positive attitude on medical care practices [AOR:5.49,95%CI:(2.1913.73), $p<0.0001$].

Conclusion:

The current study has revealed a poor knowledge of neonatal danger signs among the study mothers. The medical care seeking behavior was also found to be inappropriate among the majority of the mothers. Having health insurance and the presence of a positive attitude towards medical care services provided at the healthcare facilities were found to be independent predictors for appropriate medical care seeking practices among mothers whose newborns were admitted in the health facility for medical care. Recommendations: Health care workers should counsel and educate pregnant mothers on a comprehensive package of essential newborn care that should include knowledge of neonatal danger signs, especially during the third trimester and in the

postnatal period just before discharge after delivery. The knowledge should be reinforced with emphasis when to return to health care facility urgently when a neonate develops any of the neonatal danger signs. As a means of sustaining cost-effective interventions, mothers as partners in delivery of health care knowledge of neonatal danger signs and timely health care seeking behavior should be included in Reproductive, Maternal and Newborn health-care package. This includes adding neonatal danger signs in the reproductive and child health cards and booklets. In the context of Universal Health Insurance arrangements should be made to provide health insurance to all new born babies. The findings of this study call for a larger interventional study on the implementation of postnatal health education for women upon delivery.
