“If really we are committed things can change, starting from us”: Healthcare providers' perceptions of postpartum care and its potential for improvement in low-income suburbs in Dar es Salaam, Tanzania

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Abstract

Objective

To explore healthcare providers' perceptions of the current postpartum care (PPC) practice and its potential for improvement at governmental health institutions in low-resource suburbs in Dar es Salaam, Tanzania.

Design

Qualitative design, using focus group discussions (8) and qualitative content analysis.

Setting

Healthcare institutions (8) at three levels of governmental healthcare in Ilala and Temeke suburbs, Dar es Salaam.

Participants

Registered, enrolled and trained nurse-midwives (42); and medical and clinical officers (13).

Results

The healthcare providers perceived that PPC was suboptimal and that they could have prevented maternal deaths. PPC was fragmented at understaffed institutions, lacked guidelines and was organized in a top-down structure of leadership. The participants called for improvement of: organization of space, time,

resources, communication and referral system; providers' knowledge; and supervision and feedback. Their motivation to enhance PPC quality was high.

Key conclusions

The HCP awareness of the suboptimal quality of PPC, its potential for promoting health and their willingness to engage in improving care are promising for the implementation of interventions to improve quality of care. Provision of guidelines, sensitization of providers to innovate and maximize utilization of existing resources, and supportive supervision and feedback are likely to contribute to the sustainability of any improvement.