

BIRTH PLANS/HUMANE AND CULTURALLY APPROPRIATE CHILDBIRTH: AN EXPERIENCE OF INCREASING INSTITUTIONAL BIRTHS

By Renee Charleston, External Consultant, Dr. Oscar Boza and Dr. Julio Valerio, CRS Nicaragua.

Child Survival Project Matagalpa– Nicaragua

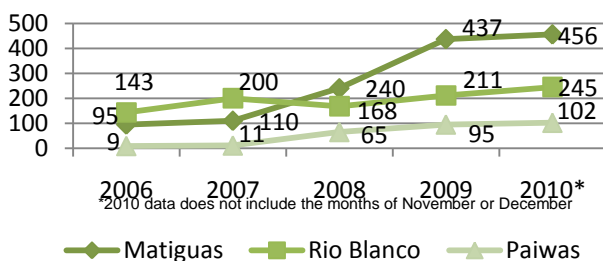
SUMMARY

Since October 2008, CRS/Caritas Matagalpa in conjunction with the Ministry of Health has implemented an innovative Child Survival project in the municipalities of Matiguas, Rio Blanco, and Bocana de Paiwas, targeting a population of 113,560 people in 125 communities. This targeted group represents 66% of the entire population of those districts.

The project's aim is to reduce maternal and child mortality by creating synergies between community based volunteer networks, maternity waiting homes (MWH), and institutional health centers. This has been carried out through the introduction and implementation of birth plans at the community level, comprehensive promotion of MWHs, and the implementation of a humanization and cultural adaptation strategy for institutional childbirth.

The outcome has been a dramatic increase in usage of MWHs and institutional births.

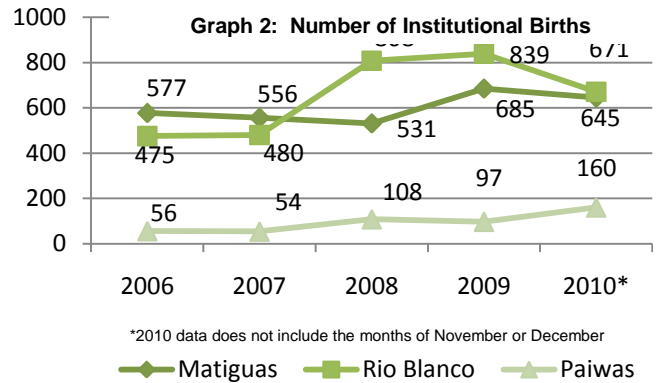
Graph 1: Yearly MWHs Occupants



BACKGROUND

The coverage area for this project, due to extreme poverty, high levels of illiteracy, and poor accessibility, had institutional delivery rates below the reported average of 40% for the rest of Nicaragua. In many of these remote communities, institutional birth was not even a consideration due to cultural norms and travel time to a health facility, which averages four to eight hours.

The Project, along with the Ministry of Health of Matagalpa, has implemented a comprehensive humanization and cultural adaptation strategy, in order to improve institutional deliveries and increase the number of women choosing institutional births over home births by at least 60%. These activities have included infrastructure improvements, retraining of health facility personnel, promotion of best practices for safe delivery (WHO recommended), and investments in new equipment.



SYNERGY OF STRATEGIC BIRTH PLANS AND CULTURAL HUMANIZATION OF CHILDBIRTH

At the community and family level, promotion and family education about safe birthing practices and the development of individual strategic birth plans has been carried out by volunteer networks of Traditional Birth Attendants, transport brigades, and health facility personnel. The development of birth plans highlights the role of prenatal checkups and the use of MWHs. During the process of developing a birth plan, volunteers encourage pregnant women that are high risk or live in remote locations to make use of MWHs prior to delivery. This promotion is performed in collaboration with health facility staff who also advise pregnant women during prenatal checkups on the importance of using the MWHs. As a result of this comprehensive promotion of birth plans and use of MWHs, the attendance at MWHs has steadily increased as demonstrated in Graph 1.

In conjunction with the community promotion for institutional births, health personnel have worked to improve delivery care by providing a culturally appropriate and more humane service. Exit interviews have indicated that mothers and families are leaving with a positive perception of institutional deliveries where they felt that they were treated with respect and their cultural traditions were taken into account. These experiences have helped to change community behavior and attitudes regarding institutional births, resulting in an increased number of institutional births. (See Graph 2)

The synergy between community and institutional activities through volunteer networks and MWHs has greatly improved participation in MWHs and coverage of institutional births.