

Adanna Agbo, DrPHc, MPH, MSN, RN, PHNA-BC
2014/2015 Fulbright Grantee – Nigeria
Research Affiliate of University of Nigeria
Nsukka- Enugu campus

Global Health Scholarship: Fulbright Experience in Nigeria



What is a Fulbright Student Grantee?

Senator J. William Fulbright

- In 1945, introduced a bill in the United States Congress that called for the use of surplus war property to fund the 'promotion of international good will through the exchange of students in the fields of education, culture, and science.
- The Fulbright U.S. Student Program is the largest U.S. exchange program offering opportunities for students and young professionals to undertake international graduate study, advanced research, university teaching, and primary and secondary school teaching worldwide.
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 - Recent graduates - Graduating seniors and recent bachelor's-degree recipients
 - Master's and doctoral candidates
 - Young professionals, including writers, creative and performing artists, journalists, and those in law, business, and other professional fields



My Journey

Native of Nigeria

Nursing experience-
Local and Global

Graduate of UMB SON
C/PH program & UMB
MPH program

Graduate of Global
Health Certificate
program

- Final project explored maternal health in Nigeria



Why focusing on maternal health in Nigeria is Important

- Maternal mortality as a major global health problem
- Maternal death or mortality is described as the death of a woman that occurs as a result of pregnancy and childbirth related complications; before, during or immediately after childbirth; or in the case of spontaneous or elective abortion, within 42 days following pregnancy termination (World Health Organization, 2013).

Scope of the Challenge

According to WHO reports, the number of maternal deaths that occurred worldwide in 1990 was 523 000, in 2008 the number was 358 000, and in 2013, there were 289 000 maternal deaths (World Health Organization, 2013).

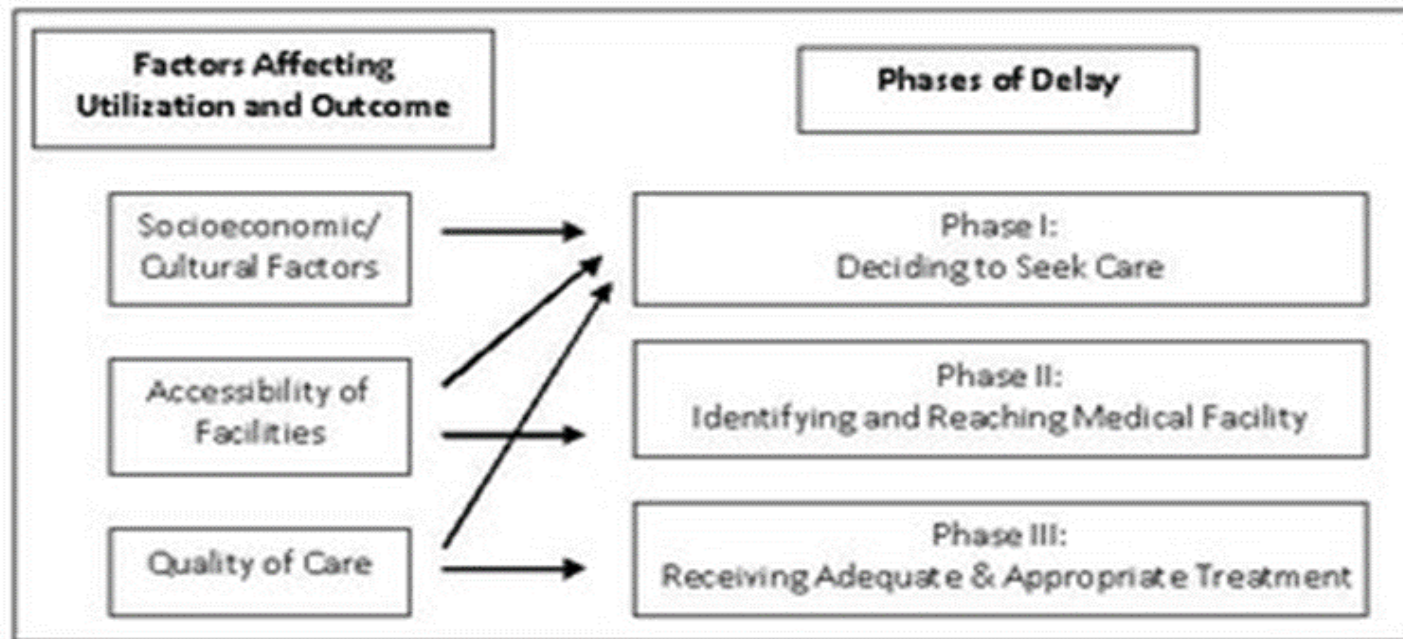
“For each woman who dies, approximately 20 others suffer from pregnancy-related consequences” (The Center for innovation & Technology in Public Health, n.d.).

The United Nations Population Fund (UNFPA) report that in 2008, half of all maternal deaths occurred in only six countries: **Nigeria**, Ethiopia, the Democratic Republic of Congo, Pakistan, Afghanistan and India (UNFPA, 2012).

The WHO further adds that as of 2013, 1/3 of all global maternal deaths occurred in only 2 countries, **Nigeria** (40,000 deaths annually) and **India** (50,000 deaths annually) (WHO, 2014).

Maternal Deaths & the 3 Delays

- The 1994 landmark research by Thaddeus ' & Maine produced the Three Delays Model.
- Factors that affect the use of health services during an obstetric emergency fall under three delay categories that occur during a pregnancy or childbirth.





Fulbright in Nigeria

- **Project Title:** Exploring the Factors Associated with Maternal Health Outcomes and Health Seeking Behaviors in Southeastern Nigeria: A Rural Community-based Study
- **Research Questions:**
 - What is the prevalence of maternal deaths in the communities?
 - What are the cultural practices related to pregnancy, giving birth and after delivery?
 - What are the delay factors that affect the decision to seek & receive services?
 - What are the behavioral factors that affect intention & behavior to seek services?
 - What are similarities and differences between the women that seek maternal health services and those who do not?
 - What can be done to improve the situation?
- **Partners:** Fulbright, University of Nigeria Nsukka & Enugu Campus



Methods

- **Qualitative Study-**
Interviews with community members-Focus groups.
- My study Location: Isi-Uzo
Local Government Area
(LGA) in Enugu State (rural)
- Description of FGD
participants

Gaining Entry to Communities Requires Building Relationships



- Advocacy Visits to:
Igwes, The Chairman of the LGA,
Religious Leaders, Women
Leaders
- Recruitment at churches, market
places
- Observations at Health
Centers
- Focus Group Discussions- focus
for today's presentation
- Surveys with a Cohort of
Pregnant Women in 2nd phase

Results

Delay I- Socioeconomic/Cultural Factors

- Different practices exist that impact pregnancy, childbirth & post-delivery
- There are no cultural practices that prevent participants from going to health center (HC)
- Religious restrictions from Faith Tabernacle congregation in one community
- There is general knowledge of Danger Signs during pregnancy



Results

Delay II - Accessibility of Facilities

- (Accessibility of Facilities – Distance, Staff, Commodities-Drugs, Hours)
- There are health centers in the communities where the participants reside
- In one community, the HC is not open Saturday & Sunday, and is open 9am – 5pm on weekdays
- The HC distance from each woman's residence varies, for some women it is far, for others it is close by
- The HC distance determines “reachability”
- In the communities, there are the professionally trained nurses in the HCs, then there are also non-professionally trained nurses – referred to by the participants as Private nurse/Auxiliary nurse/Chemist nurse, “Quack” nurse
- One community reported presence of TBAs, while the other reported no TBAs in their community
- The participants reported that the private/auxiliary nurses are more reachable & accessible compared to HC
- Women deliver in different locations – home, HC, farm, on the road, larger health facilities (hospitals)



Results

Delay III- Quality of Care

(Affordability, Care)

- Without complications, HC delivery cost in 1 community is N10,000, Auxiliary nurse delivery cost in the same community N5,000
- Without complications, HC delivery cost in the 2nd community is N4,000 for boys & N3,000 for girls, Auxiliary nurse delivery cost in the same community N4,000 for boys and girls
- Weekly HC ANC in 1 community is N200, and N50 in the 2nd community (with N150 for registration)
- Delivery items to be purchased by woman such as soap, bleach, razor, baby items, etc., cost about N5,000
- TBA charge is 4 tubers of yam
- Affordability in terms of cost – Yes for some women, No for others
- Women reported better care experience at the private nurse and even the TBA than at the HC



Recommendations from Participants for Improving Situation

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- Reduce Cost
 - Provide Staff
 - Provide Qualified Staff
 - Provide kind staff
 - Give free drugs
 - Be available
 - Improve services at health care sites
 - Improve facilities at health care sites
 - Improve staff at health care sites
 - To Decrease Deaths –
 - Provide qualified doctors & nurses
 - Educate women about Danger Signs & Family Planning



Expanding as a Global Nurse Leader: By Assisting with Nursing Department


- Guest Speaker at the induction ceremony for the Nursing Department
- Lectured two classes for the nursing students
- Special guest at the Community Health Day organized by nursing students
- Donated some books to the Nursing Department at UNEC





Thank you to participants





The End...The Beginning!

- This has been a MIND BLOWING, EXCITING, REWARDING, ONCE IN A LIFETIME EXPERIENCE FOR ME
- Special thanks to the Fulbright Program, the US Department of State, the Institute of International Education, University of Nigeria Nsukka, and Morgan State University

Thank You

