

**BIRTH PREPAREDNESS AND
COMPLICATION READINESS
AMONG MOTHERS ATTENDING
FOCUSED ANTENATAL CARE AT
KIAMBU DISTRICT HOSPITAL**

BY

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**A STUDY IN PART FULFILLMENT OF MASTERS OF
MEDICINE IN OBSTETRICS AND GYNAECOLOGY**

CERTIFICATION OF SUPERVISORS

This is to certify that this research was undertaken by Dr Odidi Kendo under our guidance and supervision and that this book is submitted with our approval

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ABSTRACT

Background: Many of the complications that result in maternal and perinatal deaths are unpredictable and can be of sudden onset. Delays in responding to them have been shown to be one of the major barriers in reducing mortality and morbidity surrounding child birth. Birth-preparedness and complication readiness (BP/CR) is a comprehensive strategy to reduce these delays and improve the use of skilled providers at birth, the key intervention shown to decrease maternal mortality.

Objective: To assess Birth Preparedness and Complication Readiness among mothers attending Focused Antenatal care (FANC) at Kiambu District Hospital (KDH).

Design: This was a Cross sectional descriptive study.

Setting: Antenatal clinic at Kiambu District Hospital (KDH).

Methods: An exit interview was administered to selected mothers during their visit at the antenatal clinic. Data was entered and analyzed using SPSS/PC program.

Findings: A total of two hundred and seventy (270) mothers were interviewed. Up to (92%) had been counseled on danger signs during pregnancy but only 48% were informed about the same in the postpartum period. Majority (85.9%) had made arrangements for funds to cater for childbirth expenses and 80.7% had plans for transport. Up to 56% knew at least 3 danger signs during pregnancy but only 18% knew the same in the postpartum period. Most (95%) planned go to hospital in case of emergency with 80% reporting having set aside funds for the same. Level of education, occupation and advice given at the clinic were all found to have significant positive relationship with knowledge of danger signs (p value= 0.044, 0.006 and 0.00 respectively) and advance arrangement for funds to cater for childbirth expenses (p value < 0.001 for each)

Conclusion BP/CR seem to have improved compared to studies before the introduction of FANC. Education, occupation and information given at the ANC were all found to positively influence BP/CR in this population.

Recommendations: Informing mothers on aspect of BP/CR should be emphasized during ANC visits together with girl child education and economic empowerment as long term interventions. More elaborate studies are still needed in order to assess the success of FANC in meeting BP/CR objectives.