Abstract:

The Millennium Development goals (MDGs) are eight goals to be achieved by 2015 that respond to the world's main development challenges. The MDGs are drawn from the actions and targets contained in the Millennium Declaration that was adopted by 189 nations and signed by 147 heads of state and governments including Kenya. The eight MDGs break down into eighteen quantifiable targets that are measured by 48 indicators. This study was conducted in Mandera District, North Eastern Province Kenya and focused on MDG 5, which seeks to reduce maternal mortality by three-quarters by 2015. This goal is measured by two key indicators- (i) improving skilled attendance i.e. ensuring that women are attended to by a trained health worker at the point of delivery with the requisite supplies and equipment and (ii) reduction in maternal mortality ratio i.e. reducing the lifetime risk of women dying from a maternal death. The general objective of the study was to explore the level of preparedness of the health system in Mandera District in terms of inputs towards realization of MDG 5. It had four specific objectives: (i) to establish the level of understanding of MDG 5 among health professionals in the district, (ii) to establish the level of understanding of MDG 5 among community leadership, (iii) to assess the extent to which the health system has moved towards meeting the expectations of MDG 5 and (iv) to assess the constrains facing the health system in meeting the expectations of MDG 5. The study was qualitative in its approach. Focus group discussions and key informant interviews were conducted with health facility staff, traditional birth attendants, women and community leaders in the catchment areas. A structured observation checklist was used to assess health facility infrastructure, supplies and equipment's suitability to meet the requirements of MDG 5. The study examined the key requirements to address maternal deaths through a WHO model titled the 'three delay model'. This model focuses on the main reasons why women die during child birth and what needs to be done to avert these deaths. The three delays are (i) delay in seeking care; (ii) delay in reaching the medical facility during an obstetric emergency and; (iii) delay in receiving care once a woman has reached the medical facility. The study found that there were obstacles in each of the three delays, which has resulted in high numbers of obstetric emergencies as well as well problems within the health system that reduce the ability of the health workers to minimize maternal deaths. The study concludes by focusing on MDG 5 indicators and the extent of their achievement in the district. The study makes the following key recommendations for improving maternal health outcomes in Mandera district. These are: 1. Strengthen the capacity of the Ministry of Health and other health providers through training in emergency obstetric care as well as provide health facilities with the required supplies and equipment to address obstetric complications 2. Increase the number of health staff available who can be deployed and retained in this hardship district through incentives to health workers 3. Review existing WHO policy that rejects the use of traditional birth attendants for home deliveries in light of reality in hard to reach areas. 4. Empower community members to support pregnant women in their quest for health services through raising awareness on pregnancy complications and the need for skilled attendance 5. Improve access to family planning services in the district.