A COMPARATIVE STUDY OF KNOWLEDGE, ATTITUDES AND PERCEPTIONS OF WOMEN AND MEN AROUND PRE-ECLAMPSIA AND ECLAMPSIA IN NIGERIA

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Background

- Maternal mortality ratio (MMR) in Nigeria is one of the highest in the world estimated to be 576 deaths per 100,000 live births (NDHS 2013).
- PE/E is the leading cause of maternal death accounting for nearly 40% maternal deaths in northern Nigeria.
- Most of these deaths are experienced in rural communities where socio-cultural norms, beliefs, and practices play a major role in the lives of pregnant women.
- However, the burden of PE/E could partly be averted, if pregnant women change health care-seeking behaviors and attend antenatal care very early in their pregnancy.
Community Insights
Objectives

• To assess perceptions, knowledge levels, attitudes and experiences of PE/E among men and women
• To understand women’s health seeking behaviors during pregnancy
• To gain deeper understanding into the knowledge and perceptions of PE/E and health seeking pathway among men and women
• To compare gender differences in knowledge, attitudes, and perceptions around PE/E
Methodology

FOCUS GROUP DISCUSSIONS WITH COMMUNITY MEN AND WOMEN
Findings
Women’s knowledge, attitudes and beliefs about PE/E

- PE/E is seen as a deadly illness that is experienced among pregnant women especially in rural communities.

- PE/E is considered as a normal experience women encountered during pregnancy thus its prevention is not taken serious.

- Severe headaches, swollen legs, high blood pressure, sleepless nights, dizziness, over-thinking, malaria, fever, and weakness of the body are seen as the major danger signs of pregnancy.

- “When problems like that arise, majority of them ends at death, sometimes, the mother may survive it while the child will not”.

- “I saw a woman who died in the process... She lost blood and never give birth. She and her unborn child gave up the ghost”.

- “It is considered to be normal in pregnancy. Women know the difference because we feel the difference and when we complain, people don't take it serious.”

- “I have personally experienced it. It is a condition that comes with a severe headache and fever.”
Men’s knowledge, attitudes and beliefs on PE/E

- Men sees PE/E as a serious problem that leads to the death of both mother and child and still nothing is being done to address it.
- Most women that experiences PE died. Some even when they are alive undergo some traumatic distress (loss of sight, hearing, mental distortion, paralyses).
- Symptoms of PE/E identified include engaging in strenuous activities, eating unbalance diet, over thinking, taking excessive cold things etc.
- “Women that experience convulsion usually die in the process of given birth or the mothers become mentally unfit or paralyzed.”
- “Heavy blood flow, pre-eclampsia, swollen body, vomiting and backache are serious issues when seen on pregnant woman. We become confused and start thinking of how to save the mother or the baby.”
- “First pregnancies always lead to high blood pressure because some women listen to stories of how pregnancy worries”
Spiritual beliefs

- Both men and women perceived PE/E to be caused mainly by *witchcraft, attack from enemies, spiritual attack, ignorance, financial constraints, anxiety* and fear.

  “I was a victim. I delivered a baby, I lost lots of blood and was unconscious. I gave birth at 5:00, I was left lying down where I delivered till around noon. When my sister came to see me, community people told her I came in contact with jinn's”

  (FGD women group)

  “The cultural belief in our home is Juju/witchcraft is usually the likely cause of these problems” and hence it is diabolic”

  (FGD Men group)
Decision making and health seeking behaviors among men and women

- Husbands and mother-in-law's play a critical role in deciding where a pregnant women goes when complication arises.
- Herbs, traditional medicines, and prayer homes are seen as first line of treatment for PE/E.
- Only a few of the men and women think that PE/E is treatable at health facilities, others believe that it can only be treated by visiting herbalist.
- “Some mother-in-law will tell the wife to go to the herbalist while some will recommend to see pastor instead of them to see and complain to the doctor.” (FGD women)
- Mother in - laws may deprive their son's from taking wife's to hospital for treatment. Some belief that is a devilish illness, associated with Jinn's and some might think a pregnant woman came across it as a result of her wondering around (FGD women).
- “if it is a lady we believe that she has a spiritual husband and that sacrifices must be carried out (FGD men)
- We have different beliefs, our women who are not educated believe that it is evil, witch craft or spiritual and tend to seek from traditional healers, they give them concoction to drink instead of seeking help from hospital. (FGD women)
Decision making and health seeking behaviors among men and women

- Remedies include making sacrifices, using different concoctions, and incantations are preferred to orthodox medicines.
- Doctors are often misdoubted to provide adequate treatment to a woman with PE/E.
- Referral to health facilities is seen as the last resort when all other traditional means for seeking care fails.

  - “In our community, people think doctors can’t solve the problem, so they prefer the herbalist.” (FGD women)
  - “Concerning high blood pressure, I heard from my friend that his wife went into a hospital and what they told her was to take less salt and also should not think otherwise. For this, I know what counsel to give to other potential victims of this problem.” (FGD men)
  - ”When they are suffering like that, they term it to be a spiritual problem hence they visit the herbalists until it becomes complicated that they later resort to hospital” (FGD women)
Conclusion

- Misconceptions, myths and mistrust among community men and women negatively influence their care-seeking behaviors.
- There is need to educate both men together with their spouses on the biological basis of PE/E and their amenability to medical interventions.
- Enlightenment programs educational campaigns using mass media and interpersonal communication on PE/E and early health care seeking behavior should be instituted in communities
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