

**THE ATTITUDE OF WOMEN TOWARDS THE UTILIZATION OF ANTENATAL CARE SERVICES AMONG REPRODUCTIVE AGE GROUP WOMEN IN KADUNA SOUTH LOCAL GOVERNMENT**

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*Abstract*

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*This research work aimed at investigating the attitude of women towards the utilization of antenatal care services among reproductive age group women (15-49 years) in kinkinau, Kaduna south local government of Kaduna state. The study had been undertaken to provide opportunities for health education. Antenatal care makes an effort to recognize women who are at risk of complication. The study design was the descriptive survey, three (3) research questions were formulated to guide the study, a sample size of 100 was taken for the study, a well-developed questionnaire was used for data collection. The result showed that 95% of women have a positive attitude toward antenatal care services while 5% have a negative attitude, 89% of the respondents utilized antenatal while 11% did not, 36% said lack of awareness is a hindering factor for the utilization of antenatal care services, 49% said nurses attitude. From the above analysis, it was concluded that women have a positive attitude towards antenatal care services. Effort should be made in improving the quality of the services at the facilities, community education should also emphasize the importance of antenatal care in order to change the attitude of women and maximize the utilization of the services.*

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**Keywords:** antenatal, utilization, attitude, Reproduction, women.

**1.0 INTRODUCTION**

Antenatal care is a basic component of maternal care on which the life of mother and baby depend, and also an important determinant of high maternal morbidity and mortality rate. Delayed access to antenatal care has been linked to increased maternal and fetal mortality and morbidity. Antenatal care is care provided by skilled health personnel to a pregnant woman throughout her pregnancy for the purpose of obtaining the best possible outcome for the mother and child and also for monitoring of health, body and support one to make appropriate plans.

It was observed world Wide by World Health Organization (W.H.O 2015) that around 830 women died every day from problems in pregnancy and childbirth. Only 5 of the women who died lived in high-income countries, the rest of the women lived in low-income countries. And also lack of proper utilization of antenatal care services increases the risk of maternal mortality and morbidity. There are health care facilities providing antenatal care services in kinkinau but yet very few numbers of women utilize the services either because they don't believe in it or because of the cultural or religious influence. Obviously, even if women see antenatal care service as for their health, the level of its utilization may be low, especially when they don't have easy access to the service.

Furthermore, the utilization of antenatal care services may be associated to so many factors such as distance to a health care facility, low income to pay for the service, lack of permission from the husband and alike. The above reasons necessitate the research to be carried out in Kinkinau community. The objectives are to examine the attitude of women toward antenatal care, examine the level of antenatal care utilization, and identify the factors hindering the utilization of antenatal care in the area.

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### 1.1 AN OVERVIEW ON ANTENATAL CARE

According to family health foundation trust (2012) antenatal is the care an individual receives from health care professionals during pregnancy. The purpose of antenatal care is to monitor her health, the baby's health and support her to make plans which are right for her.

The midwife will offer a series of appointment, the first appointment is called "booking". During each antenatal visit, they will check that the mother and baby are well, give the mother useful information about being pregnant and answer any questions the mother may ask. The mother will be asked to supply a sample of urine at each visit and an important part of antenatal care is getting information that will help the mother to make an informed choice about her pregnancy.

The Magret Myles (2009), antenatal care refers to the care that is given to pregnant women from the time that conception is confirmed until the beginning of labor. The midwife will provide a woman center approach to the care of the woman and her family by sharing information with the woman to facilitate her to make an informed choice about her pregnancy.

Elisha (2011) refers to antenatal care is provided in antenatal clinics which are usually conducted by medical practitioners, obstetricians, gynecologist, and trained midwives. The first visit is very important and this service has many useful purposes, it is called "booking visit" the antenatal clinic also serves as the venue for report contact and report visit between the woman and her midwife or medical attendant until she delivers.

According 3 Magret Myles (2009), the aims of antenatal is to monitor the progress of pregnancy in order to support maternal health and normal fetal development. It is essential that the midwives critically evaluate the physical, psychological and sociological effect of pregnancy on the woman and her family. The midwife achieves this by: Developing a partnership with the woman, Proving a holistic approach to the woman's care that meets her individual needs, Being an advocate for the woman and her family during her pregnancy, supporting, supporting her right to choose care appropriate for her own needs and those of her family, Recognizing complications of pregnancy and appropriately referring women to the obstetric team or relevant health professionals or other organizations, and Exchanging information with the woman and her family enabling them to make informed choices about pregnancy and birth (Nago Yamena and Alema Yehu, 2012).

According 6 the National Health Scheme trust (2015), most pregnant women are fit and healthy and can receive all of their care from the midwifery team. The midwifery team will discuss the care with the woman at the beginning of her pregnancy and ongoing risk assessment will help identify change from normal that may require additional appointments or refer to the consultant's team. The types of antenatal care are under Midwifery group practice: Antenatal care is undertaken by a small team of midwives working in the community and hospital. The care may be from the general practices, surgical or in one of the children's centers in the area, therefore offering the woman a choice of venues. Consultant led hospital-based care: It may be advisable due to the medical history or problems that arise during pregnancy for the antenatal care to be provided at the hospital. Shared care: Antenatal care that is shared between the midwife and consults obstetrician.

### 1.2 RESEARCH METHODOLOGY

The study is a descriptive survey on the attitude of women towards the utilization of antenatal care services in Kinkinau where the structured questionnaire was used to collect information. The target population for this study is reproductive-aged group women (15 – 49 years) in Kinkinau community Kaduna South Local Government Area Kaduna State. And there are estimated of about one thousand (1000) reproductive group women of this age. The sample size for this study is 100 respondents drawn from the target population. Stratified sampling technique was used in which the streets were used as strata to pick the respondents. Ten out of 25 streets in the area were picked at random in which 10 respondents were selected from each street in a simple random sampling way. A well-structured questionnaire was used to get information from the respondents. the questionnaire was divided into 2 sections. Section A consisting of demographic data and section B concerns the objectives of the study. The method used for data analysis was the use of descriptive statistics. In this research work, the data collected was analyzed using the table, frequency, and simple percentage.

### 1.3 RESULT AND DISCUSSION

#### Socio economic characteristics of responders

**Table1: socio economic characteristic**

Age	Frequency	Percentage %
15-24	19	19%
25-34	40	40%
35-40	26	26%
41 & above	15	15%
Total	100	100%
<b>Marital</b>		
Single	25	25%
Married	75	75%
Total	100	100%
<b>Religion</b>		
Islam	90	90%
Christianity`	10	10%
Traditional	0	0
Others	0	0
Total	100	100%
<b>Occupation</b>		
Student	35	35%
Self employed	28	28%
Farmer	0	0
Civil servant	37	37%
Total	100	100%
<b>Education</b>		
Primary	10	10%
Secondary	24	24%
Tertiary	59	59%
None	7	7%
Total	100	100%

Data in table 1 – 12 come from January 2019 field survey

$$\text{Percentage} = \frac{\text{Frequency No}}{\text{Total population}} \times 100\%$$

In table 1, it has been that 40 respondents representing 40% of the total population are between ages 25-34years, 26% of the total population are between ages 35-40years, followed by 19 respondents representing 19% of the total population are aged between 15-24years, while 15% are ages 40 & above. This justifies that the majority of respondents are within the ages 25-34years representing 40% of the total population. Also, it shows that 75 respondents representing 75% of the total population are married while 35% of the total population is single. It concludes that the majority of those whose respondent were married with the dominant percentage of 75.

The religion which served as the determinant factor or of the northern activities was analyzed which shows that 90% of the total population were Muslims and 10% were Christians. This revealed that the majority of respondents were Muslims with 90% and are the dominant population of the area. In addition, the occupation of the responders shows that 37 respondents representing 37% of the total population were civil servants, 35% were students followed by 28 respondents representing 28% of the total population were self-employed. This implied that the majority of the respondents were civil servants with 37% of the total population.

Table 1 reveals that 59% of the total population attain tertiary level, 24% attain secondary level, 10 respondents representing 10% of the total position attain primary level and 7% of the total position did not attend school. This justifies that majority of the respondent in the area attain tertiary level with 59% of the total population.

**Table 2: Have you heard of antenatal care?**

Responses	Frequency	Percentage %
Yes	88	88%
No	12	12%
Total	100	100%

The table 2 indicates that 88 respondents representing 88% of the total population heard about antenatal care while 12% of the total population did not hear about antenatal care. These implied 88 respondents have heard of antenatal care with the dominant percentage of 88.

**Table 3: Source of information**

Source	Frequency	Percentage %
Media	21	21%
School	44	44%
Friends	23	23%
Others	12	12%
Total	100	100%

Table 3, shows that 44% of respondents heard about antenatal care through school, 23% of the total population heard about antenatal care through friends, 21% heard about antenatal care through media while 12 respondents representing 12% of the total population heard about antenatal through other means. This indicates that majority of the respondents heard about antenatal care through school with a percentage of 44.

**Table 4: Views on perception of Antenatal care**

Responses	Frequency	Percentage %
Good	95	95%
Bad	5	5%
Very bad	-	-
Total	100	100%

Table 4, result shows that 95 respondents representing 95% of the total population perceived antenatal care as good while 5% perceived it as bad. This indicates that the attitude of women in the area towards antenatal care services is good.

**Table 5: Views on antenatal care utilization**

Responses	Frequency	Percentage %
Yes	89	89%
No	11	11%
Total	100	100%

In table 5, 89% of the total population utilized antenatal care services while 11% of the total population did not utilize antenatal care service. This revealed that the utilization of antenatal care services is high among the women in the area with 89%.

**Table 6: Views on whether antenatal care plays a role in preventing pregnancy complication**

Responses	Frequency	Percentage %
Yes	91	91%
No	6	6%
Don't know	3	3%
Total	100	100%

In table 6, shows that all respondents representing 91% of the total population believed that antenatal care plays an important role in preventing pregnancy complication, followed by 6% who did not believe and 3 respondents representing 3% of the total population did not answer the question. This justified that majority of the respondents believed that antenatal care plays a role in preventing pregnancy complication dominating with 91%.

**Table 7: Views on whether antenatal care is necessary**

Responses	Frequency	Percentage %
Yes	94	94%
No	6	6%
Total	100	100%

Table 7, shows that 94 respondents representing 94% of the total population agreed that antenatal care is necessary while 6% said it is not. This implies that antenatal care is necessary for the women of the area with a dominant of 94%.

**Table 8: Place where women prefer to go for antenatal care**

Responses	Frequency	Percentage %
Government hospital	71	71%
Private hospital	29	29%
Others	-	-
Total	100	100%

Table 8, shows that 71% of the total population preferred to go to a government hospital for their antenatal care while 29% preferred private hospitals. This indicated that the majority of women in the area attend governmental hospital for their antenatal care at the expense of private hospitals.

**Table 9: Views on the antenatal care services received**

Responses	Frequency	Percentage %
Poor	13	13%
Good	50	50%
Excellent	37	37%
Total	100	100%

Table 9, indicated that 50% of the total population rated antenatal care services received as good, followed by 37% who rated it as excellent while 13% rated the services received as poor. This implied that the majority of the respondents rated antenatal care services received as good which made their attitude toward antenatal care to be good.

**Table 10: Factors hindering the utilization of antenatal care services**

Factors	Frequency	Percentage %
Lack of awareness	36	36
Culture and tradition	18	18
In availability	26	26
Others	20	20
Total	100	100

In table 10, shows that 36 respondents representing 36% of the total population choose lack of awareness as hindering factor for the utilization of antenatal care services, followed by 26% who chooses in availability, while 20% chooses other factors and 18% of the total population chooses culture and traditions.

**Table 11: Other factors that hinder the utilization of antenatal care services**

Responses	Frequency	Percentage %
Nurses attitude	49	49%
Poverty	30	30%
Lack of interest	5	5%
Husband's denial	5	5%
Long queue	11	11%
Total	100	100%

Table 11, shows respondents own opinion on the factors that hinders utilization of antenatal care services where 49 respondents representing 49% of the total population said that nurses attitude, 30% said it is poverty, 11 respondents representing 11% of the total population said long queue is a factor and 5% said lack of interest and husband's denial respectively. This justified that nurses attitude is the dominant factor that hinders the utilization of antenatal care services with 49%.

**Table 12: Ways of improving the utilization of antenatal care services**

Responses	Frequency	Percentage %
Change in nurses attitude	49	49%
Creating awareness	14	14%
Provision of more facilities	10	10%
Provision of free antenatal services	15	15%
Provision of more skilled personnel	12	12%
Total	100	100%

Table 12, shows that 49% of the total population said that in order to improve antenatal care services utilization nurses have to change their attitude, 15% said the provision of more facilities, 14% said creating awareness, followed by 12% who said provision of more skilled personnel and 10% of the total population said that there should be free antenatal services.

## DISCUSSION

The study focused on the attitude of women towards the utilization of antenatal care services in Kinkinau Kaduna South Local Government of Kaduna State. It founds out that 95% of women perceived antenatal care as good while 5% perceived it as bad. Also, it shows that 94% of women see antenatal care service as necessary while 6% sees it as not necessary. This justifies that, women's attitudes in the area towards antenatal care services is good by the majority of the respondents. This agrees with Fantanesh Desalegn (2015) who stated that in Nigeria attitudes of pregnant women towards antenatal care

services was positive. Also out that 89% of the respondents utilize antenatal care services while 11% did not. This indicates that women in the area accepted and utilized antenatal care services. This is contrary to U.W Ibor *et al.*, (2016) who stated that despite the need and availability of antenatal care, its utilization by pregnant women is low and with Peter Chris Kawungazi *et al.*, (2015) who stated that globally, developing countries still face a challenge of implementation of antenatal care and irregular clinic visits. Since out that 36% of women said that lack of awareness is a factor hindering the utilization of antenatal care services, 26% say in availability, 30% said poverty, 18% said culture and tradition. This agrees with Dinke Kenea *et al.*, (2017) who states that, marital status, cost, availability, households income, women's employment, etc. are identified factors affecting the utilization of antenatal care services 49% of the total population suggested that nurses should change their attitude in order to improve utilization of antenatal care services, 10% says there should be provision of free antenatal care, 14% says creating awareness.

This work indicates that child bearing age women have a positive attitude towards antenatal care services and also utilizes the services. The major reason for negative attitude and poor utilization are nurses attitude, poverty, long queue and shortage of skilled personnel. The implication of this result is that environmental and socio-cultural factors should be considered in training workers.

## CONCLUSION

The aim of this study is to examine the attitude of women towards the utilization of antenatal care in Kinkinau. The women in the area are aware of antenatal care and also have a positive attitude towards it and also the majority of them utilizes the service. The major hindering factors hindering the utilization are nurses' attitude, lack of awareness, long queue and availability. Therefore effort should be made to improve the quality of the services at the health facilities, training of health worker on better communication skills in order to have a good attitude towards patients, minimize waiting time and increase man power. Community education should also emphasize the important of antenatal in order to change the attitude of women and maximize the utilization of antenatal care. However, improvement of the economic status of women and targeting men with information will also help significantly in improving the utilization of obstetric services with resultant reduction in maternal death in the community. Based on the result of this research the following recommendation is: All health workers in the clinics should have continued education to address negative attitude. There should be health education with more counseling services to dispel the fear of unknown and spiritual needs of the patients. Health care providers should evolve strategies of openness in communication, caring, attitude, willingness to explain technical terms and established a good report with the client in order to correct negative believed and encourage the utilization of antenatal care services. The government should employ more health workers and also provide standard equipment needed for emergency care and laboratory investigation on pregnant women. The government should also reduce the cost of hospital charges for the less privileged in order to have access to health facilities. The government should build more facilities to reduce long queues in hospitals.

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