



DOI: 10.56892/bima.v7i01.413

A STUDY OF CHILD DELIVERY COMPLICATIONS AMONG PREGNANT WOMEN IN ZAINAB BULKACHUWA WOMEN AND CHILDREN HOSPITAL, GOMBE-NIGERIA

¹*HASSANA Y. BELLO, ²NASIRU ANAS, ³BADIYA MAHMUD and ⁴ABBAYO, Y. BELLO

Department of Sociology, Gombe State University, PMB 127, Gombe, Nigeria

Corresponding Author: nasiruanas27@gmail.com

ABSTRACT

Child delivery complications remain a public health challenge despite several efforts made by government and non-governmental organisations. Socio-cultural, economic and related health care services and logistics remains the most common factors responsible for these complications in Nigeria. This study, therefore, was undertaken to achieve the following objectives; to examine the problems pregnant women face attending antenatal care in Zainab Bulkachuwa Women and Children Hospital and examine the nature of child delivery complications among pregnant women in Zainab Bulkachuwa Women and Children Hospital. Furthermore, the study employed a descriptive research method and data was collected from a sample of 225 pregnant women from the population of 426 registered antenatal women during the study period using Krejcie and Morgan sample size calculator with 5% margin of error and 95% confidence level. The data was analysed using statistical package for the social sciences (version, 21). The findings of the study indicated that, pregnant women face problems such as waiting long time at the hospital and inadequate medical facilities they might needed during antenatal visits among other problems. Furthermore, the study found that, the complications women face includes haemorrhage, spontaneous abortion, obstructed labour, blood transfusion and caesarean section among others. Finally, the study outlines the strategies need to be followed in reducing child delivery complications among pregnant women in the hospital. These include provision of more health care facilities and drugs in the hospital, allowing traditional birth attendants to work in the hospital after training on hygiene and sanitation in and around the labour room and the pregnant woman as well as provision of free health care services to indigent women among others.

Keywords: Child Delivery Complications, Pregnant Women, Maternal Mortality, Traditional Birth Attendants

INTRODUCTION

High maternal mortality is an important public health concern in developing countries. It was for this reason; the estimated 800 women die from pregnancy complications and child birth daily in 2020. Also, about 95% of maternal deaths occur in low and middle-income countries (WHO, 2023). Most of this could have been prevented, but because of poor health care facilities, the complications are persisting. The common complications in pregnancy and child birth in these countries include obstructed labour, haemorrhage, eclampsia,

infection and abortion. These in most situations cause death among many pregnant women (Francisca and Asowa, 1997). This situation is most dire for women in Sub-Saharan Africa where 1 out of 16 women dies of pregnancy-related causes.

In Nigeria, 40,000 women lose their lives to pregnancy-related issues annually. Similarly, over one million children under the age of five also die as a result of losing their mothers to pregnancy/delivery complications (FMH, 2022). Though, there is a steady decline in the number of maternal mortality in Sub-Saharan Africa;

however, this is still far below the global target of reducing maternal mortality with 75%. Nigeria is still one of the countries that have not made progress towards reducing maternal mortality (Abubakar, Yohanna & Zubairu, 2018). For instance, in 2017, there were 67,000 maternal deaths as a result of delivery complications in Nigeria, which is far more than any other country in Sub-Saharan Africa.

Despite several attempted programmes and policies made toward reducing maternal mortality in Nigeria including the fourth world conference on women in Beijing, China 1995, United Nations Millennium Development Goals 2000, and Sustainable Development Goals 2015, in addition to other programmes made by respective administrations in the country, many women and babies still die during pregnancy and child birth in Nigeria (Dominic, 2017). For this, many factors contributed to maternal death which includes among others socio-cultural, economic or related health care services and logistics. Many studies conducted on this problem have shown that socio-cultural and economic factors affected women's health care seeking behavior by making pregnancy and child birth precarious. Similarly, poor or broken health care systems also affected the progress of maternal mortality reduction in Nigeria which contributed to high maternal deaths among women due to complications during pregnancy and childbirth. Furthermore, poor environmental sanitation contributes to the rising problem as shown by various statistical indices in Nigeria (Hassana, Nasiru and Badiya, 2020).

Adequate statistics on these factors that contribute to maternal mortality in Nigeria is rare. It is important therefore to note that, the dynamics of maternal health and mortality are yet to be fully comprehended in Gombe state (Hassana, Nasiru & Ibrahim, 2022). Therefore, understanding the real situation and nature of child delivery complications among pregnant women is

vital in dealing with the challenges of high maternal mortality in the state. Hence, the need for a research on the problems and nature of child delivery complications among pregnant women in Zainab Bulkachuwa Women and Children Hospital. The outcomes of the study will help in addressing the problems women face during antenatal and childbirth in the hospital and other hospitals in the state. The objectives this study intends to achieve are; to examine the problems pregnant women face while attending antenatal care in Zainab Bulkachuwa Women and Children Hospital and to examine the nature and experiences of child delivery complications among pregnant women in Zainab Bulkachuwa Women and Children Hospital.

MATERIALS AND METHODS

Zainab Bulkachuwa Women and Children Hospital was formerly a primary health care centre providing immediate health care needs of families in and around Bajoga ward, Tudun Wada in Gombe metropolis. The hospital was later upgraded to provide secondary medical services for women and children. The medical services provided in the hospital includes; outpatient services, inpatient services, medical services, paediatrics services, obstetrics and gynaecology services, surgical services, dental services and specific clinical services to women and children. The hospital has quite a number of medical professionals who work to provide all the necessary support to women and children.

The population of the study includes all pregnant women that attend antenatal care services in Zainab Bulkachuwa women and children hospital, Gombe at the time of the research. As at December 1st, 2022, a total number of 426 pregnant women registered for antenatal care services in the hospital. From these numbers, 225 pregnant women were drawn as sample size for the research. This was done using Krejcie and Morgan Sample Size Calculator with margin of error

of 5% and 95% confidence level. Convenient sampling method was further employed on the sample population of the study to collect data. This was done by researchers visit on the specific days of the antenatal care services in the hospital. Self-administered questionnaires were given to women to fill and returned instantly with the help of the researchers especially where the respondents could not read. The

questionnaires include both open and close ended questions on the nature of child delivery complications among pregnant women in the hospital.

The data generated was analysed using descriptive statistics which involves the use of tables, frequencies and percentages. The analysis was done with the aid of statistical package for the social sciences (version 21).

RESULTS

Table 1: Socio-Demographic Characteristics of Respondents

Age	Frequency	Percentage
16-20 years	48	21.3%
21-25 years	57	25.3%
26-30 years	42	18.7%
31-35 years	33	14.7%
36-40 years	33	14.7%
41 years and above	12	5.3%
Total	225	100.0%
Marital status	Frequency	Percentage
Married	189	84.0%
Divorced	9	4.0%
Separated	27	12.0%
Total	225	100.0%
Educational qualifications	Frequency	Percentage
Primary education	48	21.3%
Secondary education	75	33.3%
NCE/Diploma	27	12.0%
HND/B.Sc and above	21	9.3%
Non-formal education	54	24.1%
Total	225	100.0%

The table 1 shows the socio-demographic characteristics of respondents. The data revealed the age, marital status and educational qualifications of women attending antenatal care services at Zainab Bulkachuwa Women and Children Hospital at the time of the study. From the table, it has shown clearly that, majority of pregnant women fall between 21-25 years of age. Similarly, majority were married and had secondary school education. This is indicated as shown in the table with 25.3%, 84.0% and 33.3% respectively.

The table 2 indicated respondents' views on the different problems/challenges they face while attending antenatal care services in the study hospital. First, majority of the respondents revealed that, they cover short

distance from their homes to the hospital and that implies that, it is not a problem covering such distance to the hospital on the antenatal visit days. This is revealed by 60.0% of the respondents pregnant women. Second, majority of pregnant women wait for long time at the hospital during antenatal visits. This might be due to high number of pregnant women attending antenatal care services at the hospital with 75.1%. Third, 69.9% of the pregnant women attending the hospital for antenatal services do easily get family consent. This might be connected by the high level of awareness on the importance and benefits of antenatal care services at hospitals. Also, another contributory factor is education. Majority of the respondents have formal education. Fourth, respondents' opinion also shows

that, majority paid moderate charges for medical and other services. Finally, the majority of the respondents opined that, the medical facilities provided for antenatal care

services at the hospital are adequate which enables the health care personnel at the hospital to carry out their duties effectively.

Table 2: Problems women face while attending antenatal care services in Zainab Bulkachuwa Women and Children Hospital

Proximity to hospital	Frequency	Percentage
Covering long distance to the hospital	90	40.0%
Covering short distance to the hospital	135	60.0%
Total	225	100.0%
Waiting time at the hospital	Frequency	Percentage
Waiting long time at the hospital	169	75.1%
Waiting Short time at the hospital	56	24.9
Total	225	100.0%
Family consent	Frequency	Percentage
Difficult	68	30.2%
Easy	157	69.8%
Total	225	100.0%
Fees charged at the hospital	Frequency	Percentage
Free medical services	37	16.4%
Moderate fees for medical services	140	62.2%
Exorbitant fees for medical services	48	21.3%
Total	225	100.0%
Availability of medical facilities	Frequency	Percentage
Adequate	169	75.1%
Not adequate	56	24.9%
Total	225	100.0%

Table 3: Nature of Child Delivery Complications among Pregnant Women in Zainab Bulkachuwa Women and Children Hospital

	None	Once	Twice	More than twice	% of pregnant women with complications	Total
Haemorrhage	76/33.8%	40/17.8%	53/23.6%	56/24.8%	66.2%	225/100%
Spontaneous abortion	89/39.6%	58/25.8%	40/17.8%	38/16.8%	60.4%	225/100%
Retained placenta	102/45.3%	28/12.4%	69/30.6%	26/11.7%	54.7%	225/100%
Obstructed labour	60/26.7%	55/24.4%	42/30.2%	68/18.7%	73.3%	225/100%
Separated of placenta	120/53.3%	26/11.6%	50/22.2%	29/12.9%	46.7%	225/100%
Blood loss	49/21.8%	131/58.2%	23/10.2%	22/9.8%	78.2%	225/100%
Caesarean section	109/48.4%	65/28.9%	31/13.8%	20/8.9%	51.6%	225/100%
Total	38.8%	403/179.1	308/148.4%	259/103.6	62.2%	225/100%

On the nature of child delivery complications among pregnant women in Zainab Bulkachuwa Women and Children Hospital, there are a number of complications suffered by the pregnant women. These include haemorrhage, spontaneous abortion, retained placenta,

obstructed abortion and separation of placenta, blood transfusion and caesarean section. First, haemorrhage which is a form of bleeding occurs immediately after delivery, approximately 1-3 months. The data shows that, 66.2% of the pregnant women suffered haemorrhage complication

once, twice and more than twice. Similarly, spontaneous abortion is another form of abortion that occurs early in pregnancy. The finding indicated that, 60.4% of the pregnant women suffered spontaneous abortion once, twice and more than twice in the study hospital. Furthermore, retained placenta complication occurs after delivery which blocks the cervix, thus preventing the placenta from being expelled. The data shows 45.3% of the pregnant women did not suffer retained placenta while the majority respondents (54.7%) of pregnant women suffered from retained placenta once, twice and some more than twice.

Also, obstructed labour is another form of complication which occurs when a woman is in labour. The women liken this complication to “a ball-like structure that covers the face of the cervix, thus reducing or preventing more dilation”. A woman experiencing such complication continuously remains in labour for a very long period. This long labour makes the woman grow weaker and tired and may subsequently result in the death of the baby and the mother. The finding of the study shows that, majority of the respondents did

experience obstructed labour during delivery in the study hospital with 73.3% responses. Separation of the placenta is another type of bleeding that occurs at the onset of labour. Pregnant women started this bleeding before delivery is often in “the form of clots and is harmful not only to the unborn baby but also to the mother”. From the analysis, it shows majority respondents indicated that, they didn’t experience bleeding (separation of placenta) during child delivery in the study hospital with 53.3% views.

Another form of complication/problem suffered by pregnant women is blood loss in which a routine medical procedure follows to donate blood to pregnant women after losing too much blood during delivery. The analysis indicated that, majority of women had loss blood during child delivery with 78.2%. Finally, caesarean section complication occurs through surgical delivery of a baby through cut made in the mother’s abdomen and uterus. In the study hospital, a little more than half of child deliveries were done through CS. This is indicated with 51.6% of the respondents’ pregnant women views.

Table 4: Strategies towards reducing Child Delivery Complications among Pregnant Women in Zainab Bulkachuwa Women and Children Hospital

	Frequency	Percentage
Provision of more healthcare facilities	84	37.3%
Provision of more drugs in the hospital	69	30.7%
Allowing/employing traditional birth attendants to work in the hospital	47	20.9%
Free health care services to indigent women who cannot afford the bills	25	11.1%
Total	225	100.0%

From table 4, it has shown that, 37.3% of the respondents' pregnant women indicated the need for provision of more healthcare facilities as a strategy of reducing child delivery complication among pregnant women in Zainab Bulkachuwa Women and Children Hospital. The 30.7% also viewed the need for provision of more drugs in the hospital for the antenatal women, whereas 20.9% indicated the need for allowing/employing traditional birth attendants to work in the hospital which is also a strategy of reducing child delivery complications in the hospital. Finally, 11.1% suggested the need for the provision of free health care services in the hospital. These strategies when fully provided will help in reducing child delivery complications among pregnant women in Zainab Bulkachuwa Women and Children Hospital.

DISCUSSION

The study investigated the nature of child delivery complications experienced by pregnant women in Zainab Bulkachuwa women and children hospital, Gombe. The targeted population were pregnant women attendees of antenatal care services in Zainab Bulkachuwa Women and Children Hospital. The analyses has support the earlier findings made by different studies conducted in Nigeria on child delivery complications among pregnant women. A research conducted by Francisca and Asowa (1997) examined women's perception of the complications of pregnancy and childbirth in Two Esan communities, Edo State-Nigeria. The study examined miscarriage, separation of placenta, haemorrhage, obstructed labour and retention of placenta as complications experienced in pregnancy, labour or delivery. Similarly, a study conducted by Abubakar, Yohanna and Zubairu (2018) on cultural perception influencing obstetric complications among women in Kaduna, North western Nigeria

also found that most frequent maternal complications encountered by pregnant women were prolonged obstructed labour, obstetric haemorrhage, severe eclampsia and sepsis. Furthermore, a study conducted by Abioye et al (2011) on birth preparedness and complications readiness of pregnant women attending the three level of health facilities in Ife Central Local Government, Osun-Nigeria. The study revealed that, majority of pregnant women were birth and complications prepared respectively. This is due to the negative effects of the complications associated with pregnancy among women. There are many other studies conducted on child delivery complications in Nigeria and other developing countries.

From the findings of this research, it has revealed that, majority of the women were married and can read and write. This point to the increased literacy among women and the strength of the marriage institution in Gombe metropolis. The study revealed also, majority of the respondents (60%) cover short distance to reach the hospital for antenatal care services. This is an indication of easy accessibility to the hospital by pregnant women. However, the majority of the respondents (75%) maintained that, they have to wait for long time to receive health care services at the hospital. Similarly, most families (69%) allow their pregnant women to attend antenatal care services. This is also indicating some families (31%) who do not readily accept antenatal care for pregnant women in the area. The study furthermore revealed the hospital fees for antenatal care was moderate with 62.2% of the responses in the affirmative. The study also found out that Zainab Bulkachuwa Women and Children Hospital has adequate health care facilities (75.1%) to provide antenatal health care services to pregnant women seeking such services.

On the nature of child delivery complications experienced by women in Zainab Bulkachuwa Women and Children

Hospital, the study revealed majority (66.2%) of the respondents experienced haemorrhage at least once during pregnancy and delivery while some experienced such complication more than once. The study also revealed majority of pregnant women (60.4%) experienced spontaneous abortion at least once during child bearing years. On retained placenta, during child delivery, the study found out (54.7%) of the respondents experienced placenta retention after delivery. Extra medical care effort was employed and some referral to secondary or tertiary medical care was used to remove the placenta. Similarly, obstructed labour was found to be second major complication with (73.3%) to blood loss among women during child delivery in Zainab Bulkachuwa Women and Children Hospital. Furthermore, separation of placenta was found to be the least complication suffered by pregnant women with (46.7%) in the study hospital. Blood loss was found to be the major complication (78.2%) affecting pregnant women also in the study hospital. Furthermore, some deliveries end up in caesarean section as a result of the above mentioned complications to save the mother and her baby. The 51.6% of the respondents affirmed having undergone caesarean section at least once during child bearing age in the hospital.

Finally, 38.8% of the respondents recorded having no complication of any kind during child delivery, while 62.2% recorded various complications during child delivery in Zainab Bulkachuwa Women and Children Hospital.

CONCLUSION

Child delivery complications in Nigeria have continued to be a serious health care problem and contribute to maternal death among women. This study has identified several problems and nature of child delivery complications among women in the study hospital. The study has also identified the strategies need to be provided to reduce

child delivery complications which includes; provision of more health care facilities, drugs, free health care services to indigent women and employment of traditional birth attendants to work in the hospital. When these are fully provided will help in reducing drastically the number of women facing complications problems in the study hospital.

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DOI: 10.56892/bima.v7i01.413

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