

Abstract

Despite better maternal health indicators in Sri Lanka, there are disadvantaged or underserved communities such as conflict areas, estates and urban slums with poor service indicators. A paucity of research exists regarding antenatal care (ANC) services in areas affected by long-term armed conflict. This study explored the ANC received by the mothers and the factors associated with ANC indicators in the Vavuniya district in Sri Lanka.

A cross-sectional descriptive study was conducted among pregnant mothers who had completed 36 weeks of gestation. Data were collected using an interviewer administered questionnaire from mothers who were either admitted for delivery or attended a referral clinic at the General Hospital Vavuniya and the District Hospital Cheddikulam. The sample included 392 consecutive pregnant mothers. The majority of the respondents were Sri Lankan Tamils by ethnicity (82.4%), and Hindus by religion (71.2%). More than half of the respondents (58.4%) reported that their family was affected directly by the conflict.

The results revealed that: 68.4% of mothers were registered by PHM for ANC; 31.4% were registered by PHM before 12 weeks of gestation; 38.5% were visited at home by PHM; 37.8% had booking clinic visit before 12 weeks of gestation; 90% had made at least four antenatal clinic visits. Average antenatal clinic visits to specialist antenatal clinics (5.34, 95%CI: 5.03-5.65) was significantly higher than that of field clinics (2.97, 95% CI: 2.69-3.25). On average a pregnant mother was seen by a PHM at home 1.47 times (95% C I: 1.25–1.70) during the pregnancy. Almost all mothers had seen a

specialist in Obstetrics (97.9%) at least once during their antenatal period. Approximately 52% of mothers had complications in the past or present pregnancy.

Proportion of antenatal registration was significantly lower in mothers in urban areas and affected by conflict than others. There was a statistically significant difference in rate of mothers visited at home by PHM between MOH areas, with Vavuniya South reporting the highest rate (69.2%) and Cheddikulam reporting the lowest (14.7%). There was no statistically significant difference in frequency of ANC clinic visits between mothers with different selected socio-demographic characteristics.

In conclusion, this study revealed that some aspects of ANC care were poor in the Vavuniya district, especially the domiciliary care by PHM and field antenatal clinic services. Since the PHM is the key health care provider in MCH including ANC, it is important to take immediate measures to revise cadre of PHMM and fill the vacancies in the district. Field ANC clinics should be utilized more frequently while measures taken to prevent overburdening the specialist clinics. Further research is needed to assess the quality of care and availability of resources for ANC in conflict affected areas.

Key words: antenatal care, prenatal care, pregnancy, conflict, Sri Lanka.