

Safe motherhood still a long way to go

Text and photo by Sumaira Jajja

KARACHI: Dr Ayesha Ismail, a GP running a clinic in Shireen Jinnah Colony, a low-income locality of Karachi, says that though pregnancy related complications kill a lot of women, many more are left with life long disabilities that include prolapsed uterus, infections and fistula. "A lot of these deaths are preventable if timely and reliable medical advice is sought. Women go to the hospitals only when they are into labour," she said.



Pakistan has a maternal mortality rate (MMR) of 276 deaths per 100,000 live births (Pakistan Demographic and Health Survey 2006-07) while according to a UNICEF report, 'The State of the World's Children 2009', one in every 89 Pakistani women will die due to causes related to childbirth, compared to one in 8,000 in the developed world, bringing the total to 10,400 maternal deaths every year.

Talking about safe motherhood, Dr Ayesha says that lack of education and common sense are the main reasons that very often lead to maternal and neonate deaths. "These deaths are preventable if an integrated approach is followed by improving nutrition, getting immunised as well as improving hygiene and sanitation and availing medical services on time," she added. The National Health Policy aims at reducing the MMR to 250 per 100,000 births by 2010 while to meet its 2015 Millennium Development Goals 4 and 5, the government took on board donor agencies and NGOs in 2005, establishing a Mother and Neonatal Child Health (MNCH) cell within the health ministry. There was also an initiative to train midwives, with the aim to curb the MMR and infant mortality rate (IMR).

Fauzia Ambreen (not her real name) a Lady Health Worker (LHW) supervisor says that there has been some improvement since the LHW programme began in 1994, under which 100,000 community based health workers were trained. "Women had access to some better medical care and the LHWs are able to guide them with regards to pregnancy, childbirth, birth spacing, immunisation as well sanitation and nutrition, as they are from the same community and speak the same language. Plus, being from within the community, the LHWs were able to guide the expectant mothers and their families about issues related to maternal health including antenatal, natal and post natal care," Fauzia added.

According to a WPF fact sheet, only 28 percent women made four or more prenatal care visits during their pregnancy, which results in late diagnosis of complications

and, thus, a high MMR. Only 34 percent of births in Pakistan take place in health facilities and three out of five births (65 percent) take place at home without skilled birth attendants.

“For decreasing Pakistan’s MMR, a change of attitude of men and women, health care services and the general community is required,” says World Population Foundation (WPF) Assistant Program Officer (WeAct) Huma Nayani. “If a woman dies during her most productive years, her death impacts her family as she is the primary care giver and the community as it loses a productive member. Maternal health is a multifaceted problem with social, psychological and cultural roots. There is no simple or single solution. Rather, a women’s healthcare must be addressed at multiple levels and in multiple sectors of society,” Huma added.

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