Respectful and Dignified Care in Tanzania

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Woodrow Wilson International Center for Scholars Washington, DC, January 13, 2014

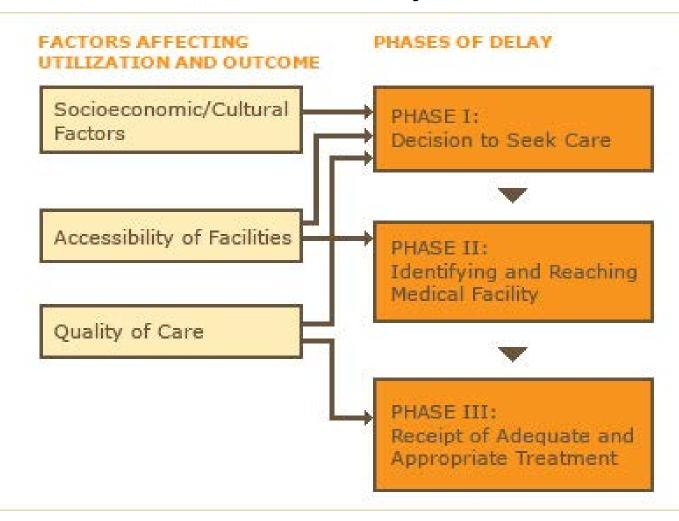




Seven categories of disrespect and abuse (Bowser and Hill 2010)

Category	Example		
Physical abuse	Slapping, pinching		
Non-consented care	Absence of informed consent or patient communication, forced procedures		
Non-confidential care	Lack of privacy (e.g. laboring in public) and/or confidentiality (e.g. disclosure of patient information)		
Non-dignified care	Intentional humiliation, rough treatment, scolding, shouting, blaming, negative perceptions of care		
Discrimination based on specific patient attributes	Discrimination based on race, ethnicity, age, language, HIV status, economic status, educational level, etc.		
Abandonment of care	Women left alone during labor and birth, failure of providers to monitor women and intervene when needed		
Detention in facilities	Detention of mother and/or baby in facility after delivery, usually due to failure to pay		

Barriers to facility delivery The "Three Delays" model



Maternal health in Tanzania

- MMR 454/100,000 live births
 - TFR: 5.4
 - Approximately 90% of population lives within 5km of a primary health facility
- Facility-based delivery nationally is 50%, however in Dar es Salaam is 90%
- Despite 90% facility delivery, Dar es Salaam has the highest MMR in the country



Photo credit: Brenda D'mello, CCBRT

Objectives

 What are types and prevalence of disrespect and abuse among women delivering in public health facilities?

 What are factors associated with disrespect and abuse?

 What acceptable, effective, and sustainable intervention(s) can reduce disrespect and abuse during childbirth?

Methods

• <u>50 structured interviews</u> with service providers and 18 in-depth interviews

Observation of 208 women and Exit interview on 2000 women

Community follow-up: 70 mothers interviewed
6 weeks post delivery in their community (CFU)

Summary of Overall Quantitative Findings: **Disrespect and Abuse Reported by Clients**

Type of Disrespect and Abuse	Exit Interview N=2000 n (%)	Community Follow-Up N=70 n (%)
Any form of disrespect or abuse	292 (14.6)	54 (77.1)
Physical Abuse	90 (4.5)	36 (51.4)
Non-Consented Care	5 (0.3)	4 (5.7)
Non-Confidential Care	34 (1.7)	36 (51.4)
Lack of Privacy	37 (1.9)	36 (51.4)
Non-Dignified Care	125 (6.3)	37 (52.9)
Abandonment	154 (7.7)	35 (50.0)
Detention	4 (0.2)	1 (1.4)

Physical Abuse

	Exit Interview N=2000, n (%)	Community Follow-Up N=70, n (%)	Observation N=208, n (%)
Physical Abuse	90 (4.5)	36 (51.4)	
Kicked	2 (0.1)	1 (1.4)	
Pinched	23 (1.2)	3 (4.3)	
Slapped	24 (1.2)	17 (24.3)	
Pushed	14 (0.7)	4 (5.7)	
Beaten	5 (0.3)	5 (7.1)	
Episiotomy without anesthesia	1 (0.1)	2 (2.9)	9 (4.3)
Tied to delivery bed/couch	2 (0.1)	0 (0)	6 (2.9)
Other	17 (0.9)	10 (14.3)	Fundal pressure applied 7 (3.40)

Non-Dignified Care

	Exit Interview N=2000, n (%)	Community Follow-Up N=70, n (%)	Observation N=208, n (%)
Non-Dignified Care	125 (6.3)	37 (52.9)	
Shouted	36 (1.8)	27 (38.6)	13 (6.3)
Scolded	92 (4.6)	17 (24.3)	
Threatened to withhold services	1 (0.1)	1 (1.4)	
Called by insulting name	3 (0.2)	0 (0)	
Laughed at or scorned	3 (0.2)	0 (0)	
Mother not welcomed in kind and gentle manner			51 (24.5)
Provider did not introduce themselves			180 (86.5)
Mother not called by her name throughout interactions			123 (60.0)
Other	14 (0.7)	1 (1.4)	

Women's voices

"I called the nurse when the baby was slowly descending and yet when she came she hit me with her fist on my thighs and she slapped me." [Respondent, CFU]

"To be left nude, everyone passing is seeing you naked" [Respondent, CFU]

"I called the provider and she told me she is drinking tea and I should not disturb her" [Respondent, client exit interview]

Observed behavior

You feel good delivering on the floor don't you see that you are making me tired?' [observed comment from provider to client]

'She was told by the nurse that the nurse doesn't want noise and to be disturbed. She called on the nurse for help, the nurse replied in ridicule "wait till God comes to help you" [observer comment]

Provider voices

'You may find delivery beds are empty but the mother is pushing the baby on the floor and wants to deliver the baby on the floor...and when you try to tell her don't deliver from this floor go there where it is more clean she will say that you are abusing her while in the actual sense you are saving both her life and the life of her baby by ensuring they don't get any infections.' [Provider]

'There is a need to scare and threaten mothers in delivery once they fail to cooperate' [Provider].

Provider voices

Job stress and burnout

"Sometimes anger and tiredness due to work lead to such things...sometimes mothers dying in the ward, we can be busy in such a way that we don't even see or talk to each other. You find like for instance a mother is in a stage of dying and you are all running around to try all you can to save her then another mother comes and say something like "Where is my card I want to be discharged," for sure you can expect a harsh response from the providers...basically what I am saying here is that based on the way we are too busy any patients who comes to ask some unnecessary questions we end up responding harshly" [Provider]

Summary

- Disrespect and abuse is a problem in Tanzania, just as in other parts of the world
- Disrespect and abuse is a complex issue influenced by individual and community norms, provider behavior, facility environment, and systems-level factors
- Addressing D&A will be a difficult and complicated process
 - The Uzazi Bora project will focus on interventions that target patients and providers within the health facility

Acknowledgement

- Study participants, facility management and staff
- Tanzanian Ministry of Health & Social Welfare
- Council Health Management Team (CHMT)
- Women and Health Initiative (W&HI) HSPH
- Comprehensive Community Based Rehabilitation in Tanzania (CCBRT)
- Management and Development for Health (MDH) team

Thank you

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