

# Improving communication and transportation linkages improves utilisation of health facilities in Sindh, Pakistan

## Background

Pakistan has a high burden of maternal and neonatal mortality and morbidity. Most deaths among mothers and babies occur around the time of birth and are mostly caused by postpartum haemorrhage, hypertensive disorders, obstructed labour, and sepsis. The situation in the province of Sindh is particularly

poor, especially in rural areas, and most deaths occur at home without skilled attendance. Insufficient access to health facilities is a major impediment. And yet, the district hospital is underutilised. We aimed to study why with a focus on examining communication, referral pathways, transportation issues, and financial factors as correlated with underutilization.

## Results:

Indicator	Pre-intervention	Post-intervention	Difference
Number of births	170	188	
Maternal deaths	2 (1.17%)	3 (1.59%)	+0.42%
Perinatal deaths	20(11.76%)	11(5.85%)	-5.91%
Place of birth			
• Home	149(87.64%)	109(57.97%)	-29.67%
• Health facility	21(25.94%)	79(42.02%)	+16.08%
Birth attendants			
• TBA/Relative/unattended	138(81.17%)	109(57.97%)	-23.2%
• SBA	32(18.82%)	79(42.02%)	+23.2%
Care givers in case of complications			
• Doctor	07	20	
• Nurse/Midwife	04	11	
• Quack	04	05	
Severe Complications			
• Haemorrhage	06(3.52%)	06(3.19%)	-0.33%
• Pre-eclampsia/Eclampsia	03(1.76%)	04(2.12%)	+0.36%
• Sepsis	03(1.76%)	02(1.07%)	-0.69%
• Obstructed labour	03(1.76%)	18(9.57%)	+7.81%
Arrangement for communication and transport for accessing care givers/facilities			
• Edhi Ambulance	07(4.11%)	33(17.55%)	+13.44%
• Private/own transport	01(0.58%)	22(11.7%)	+11.12%
• Public/hired transport/other	07(4.11%)	08(4.25%)	+0.14%
Time required for accessing care givers/facilities after decision was made to seek care (average in minutes)	120	90*	-25%

## Conclusions:

We found there to be a dire need for maternal and child healthcare facilities in the community, closer to the source of need. Sensitising the community to utilising institutions for care in pregnancy and delivery where skilled providers are present had a positive impact on care-seeking behavior. Equally, disseminating information and streamlining transport arrangements facilitated access to health facilities.

Motivating the community to avail skilled care and improving access to health facilities should be coupled with provision of quality emergency obstetric and neonatal care facilities which can improve utilization.

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