Introduction

- ≈830 women die every day due to pregnancy and childbirth
- 99% of maternal deaths occur in developing countries
- Lifetime risk of maternal death in the Philippines is 1 in 280 vs. 1 in 4900 in developed countries.

Objective of the Study

A continuation of a study on maternal care in the Philippines by a previous Princeton intern, with focus on determining what barriers exist for ultrapoor women in accessing maternal care.

Methods

Study Design: Qualitative interviews
- Negros Oriental Province, Philippines
- 24 interviews – 14 with mothers and 10 with health professionals

Participant Selection:
- Past ICM Transform Participants – Ultrapoor women living on <$0.50/day who’ve had at least one home birth
- Health professionals/workers such as nurses and midwives who have been working ≤ 5 years

Analysis: Performed using NVivo
- A conceptual framework to health care access used as a lens

Results

Barriers found within the framework:
1. Perception of Timeliness and Approachability
2. Intimidation to encourage Acceptability
3. Restricted Affordability
4. The effect of Availability and Accommodation on Ability to perceive

- 9 barangays in total
- Up to 3 hours from Dumaguete
- Transportation by car, tricycle, and motorbike

Discussion

Perception of Timeliness and Approachability
- Emergency home births
- Some mothers expressed poor appropriateness (i.e. fear of wasting health workers’ time)

Intimidation to encourage Acceptability
- Scare tactic used without full disclosure of safety
- Emphasis solely on discouraging home births not encouraging facility births

Restricted Affordability
- PhilHealth helps significantly with delivery costs
- Made to be affordable but not for those with unstable incomes.

The effect of Availability and Accommodation on Ability to perceive
- Norms within geography influences health beliefs and expectations

Conclusion

- It is important to identify what barriers exist so that solutions can be made to overcome them.
- The barriers found within the conceptual framework are the consequences caused by factors outside of the mothers’ and health workers’ control (such as the country’s political and economical state)

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