

## Unavailability of Antenatal Care Facilities as a Factor Affecting Accessibility to Antenatal Care Services among Pregnant Women in Internally Displaced Persons' Camps in Borno State, Nigeria

<sup>1</sup>Bala Mohammed Shira

08034255791, 08022349888

Corresponding author Email: [balashira3425@gmail.com](mailto:balashira3425@gmail.com)

<sup>2</sup>Jibrin Dauda

08100042525

Email: [Jibrindauda2525@gmail.com](mailto:Jibrindauda2525@gmail.com)

<sup>3</sup>Ahmed Mohammed

08038393530

Email: [Ahmad3719@gmail.com](mailto:Ahmad3719@gmail.com)

<sup>1,2&3</sup>Department of Physical and Health Education,  
Aminu Saleh College of Education, Azare, Bauchi State, Nigeria

DOI: 10.56201/ijmepr.v7.no3.2023.pg64.71

---

### Abstract

*The study examined availability of antenatal care facilities as a factor affecting accessibility to antenatal care services among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria. Survey type of descriptive research design was adopted and the population of the study comprised pregnant women in fifteen (15) IDPs' Camps in Maiduguri Municipal, Borno State totaling four thousand four hundred and forty (N=4,440). Simple random sampling technique was used and selected 400 respondents from six (6) selected IDPs' Camps. The research instrument was a researcher developed structured questionnaire which was validated by experts from Physical and Health Education Department, Aminu Saleh College of Education, Azare, Bauchi State Nigeria and the reliability was ascertained using split-half method and a reliability coefficient of .84 ( $r = .84$ ) was obtained. Data was collected with the help of six female research assistants. The postulated hypothesis was tested using inferential statistics of Chi-square ( $\chi^2$ ) at 0.05 alpha level of significance. The study revealed that, unavailability of antenatal health care facilities negatively affects accessibility to ANC services by pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria. The study recommended that, ANC services should be available at all the times in various clinics with other consumables and emergency obstetric care in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria.*

---

## **Introduction**

Borno is one of the North-Eastern states that have been hit with insurgency that claimed so many lives and displaced a lot of people from their homes. There are 15 Internally Displaced Persons' (IDPs) camps officially recognized by the Borno State Government. All the camps are located in Maiduguri Municipal Council and Jere Local Government Area. The total number of IDPs residing in the 15 camps as at May, 2020 was 92,278. The on-going insurgency is the single most important threat to health care services across the IDPs' camps. Report shows that, all IDPs' camps have various cases of health conditions such as trauma, skin infection, anaemia, measles, chicken pox, vomiting, fever, diarrhoea, HIV/AIDS, Tuberculosis (TB) and malnutrition. There are about 208 health workers providing health services across the 15 IDPs' camps. These health workers include doctors, nurses/midwives, community health extension workers, laboratory scientists, environmental health officers and pharmacists. Considering the population of the Internally Displaced Persons (IDPs) in all the camps, most of whom are women and children from 21 LGAs out of the 27 LGAs of the state, this continues to be a great barrier to health care services. In the last 6 months, 530 women gave birth in the camps. However, only 33% (n=15) of the camps have Antenatal care services (ANC). ANC services could play a role in reducing maternal-mortality and that it could ensure that pregnant women delivered with the assistance of skilled attendant (UNICEF, 2011).

Antenatal care services are the care received by pregnant women during pregnancy from skilled health personnel (Federal Ministry of Health (FMOH) 2014). World Health Organization (2016) reported that, in 2015 an estimated 303,000 women died from pregnancy-related cases, 2.7 million babies died during the first 28 days of life and 2.6 million babies were still born. Quality health care during pregnancy and child birth can prevent many of these deaths; yet globally, only 64% of women receive ANC for four or more times throughout their pregnancy. In Borno State, 55.8% of pregnant women receive ANC from skilled provider and only 16.9% give birth in health facility with trained health personnel (NDHS, 2013). The Federal Ministry of Health (FMOH, 2015), recommends four ANC visits as part of its National strategic Health Development plan 2010-2015 in Nigeria.

Availability antenatal care facilities is one of the factors affecting accessibility of ANC services, which could be due to poor supply of quality drugs, inadequate staff, and limited time of operation in a day among others. Odogwu, Audu, Baba, Bawa, Tukur, Ejembi, Adaji and Shittu (2010) conducted a study in selected rural areas in Zaria, and revealed that, none of the Primary Health Care (PHC) facilities was able to perform basic emergency obstetric care services which a standard PHC is expected to perform. In terms of skilled personnel and material resources, all the PHCs fell significantly short of National Standard of at least four midwives per centre. According to World Health Organization and Federal Ministry of Health (2009), Nigeria's health system functioning was ranked 187<sup>th</sup> out of 191 countries.

## **Statement of the Problem**

Pregnant mothers are expected to be regularly attending ANC clinics to minimize many pregnancy related complications such as anaemia, asphyxia, eclampsia, etc. and enhance maternal health. Socioeconomic status (poverty), ignorance, cultural belief, poor roads network, accessibility during the rainy season among others have equally characterized their pregnancies with associated

risks. Similarly, lack of access to health care facilities by pregnant women could be one of the factors increasing pregnancy complications and maternal health care mortality in Borno State as it has been observed that pregnant mothers are not regularly attending many ANC clinics. It is against this background that the researcher investigated availability of antenatal care facilities as a factor affecting accessibility to antenatal care services among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria.

### Research Questions

The following question has been answered:

Does the availability of antenatal care facilities a factor affecting the accessibility to ANC services among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria?

### Research Hypothesis

The following hypothesis was tested in this study:

Availability of antenatal care facilities is not a significant factor affecting the accessibility to ANC services among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria.

### Methodology

A descriptive research design was adopted for the study. The population of the study comprised pregnant women in fifteen (15) IDPs' camps in Maiduguri Municipal, Borno State estimated at about four thousand four hundred and forty (N=4,440), (NBS, 2020). Simple random sampling technique was used and selected 400 respondents. The research instrument was a researcher-developed structured questionnaire validated by three experts in the Department of Physical and Health Education, Aminu Saleh College of Education, Azare Bauchi State, Nigeria. The reliability of the instrument was ascertained using split-half method which was done at Damaturu, Local Government Area of Yobe State, Nigeria. The two scores were correlated using Cronbach Alpha. A reliability coefficient of .84 ( $r = .84$ ) was obtained. Data was collected by six (6) female research assistants. The postulated hypothesis was tested using inferential statistics of Chi-square ( $\chi^2$ ) at 0.05 alpha level of significance.

**Table 1: A table showing name of IDP camps, camp location, local government of IDPs and the estimated number of child-Bearing age women**

S/N	Name of IDPs' Camps	Camp Location	Local Government of IDPs	Estimated Number of Child-Bearing Age Women
1.	Government Girls' College Camp	Maiduguri Municipal	Bama	295
2.	Girls Secondary School Camp	Maiduguri Municipal	Bama	371
3.	EYN/CAN Centre	Maiduguri Municipal	Gwoza, Askira, Chibok, Michika,	310

			Kukawa, Munguno and Madagali	
4.	Farm Centre Camp	Jere	Jere, Mafa, Dikwa, Kala-Balge, Konduga, Bama and Marte	361
5.	Government College Camp	Maiduguri Municipal	Gwoza	230
6.	Yerwa Camp	Maiduguri Municipal	Bama	325
7.	Teachers Village Camp	Maiduguri Municipal	Kukawa	371
8.	Bakassi Camp	Maiduguri Municipal	Munguno and Guzamala	240
9.	National Youth Service Corp Camp	Maiduguri Municipal	Konduga, Bama and Dambua	331
10.	Arabic Teachers College Camp	Maiduguri Municipal	Gwoza and Askira	310
11.	MOGCOLIS Camp	Maiduguri Municipal	Abadan and Mobar	365
12.	Sanda Kyarimi Camp	Jere	Ngala, Dikwa, Mafa and Jere	371
13.	Dalori Camp	Jere	Bama	210
14.	Fori SUBEB School Camp	Jere	Bama	310
15.	Gubio Road Housing Estate Camp	Jere	Jere and Mafa	40
			<b>Total</b>	<b>4440</b>

## Results

**Research question:** Does availability of ANC facilities a factor affecting the accessibility to ANC services among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria?

**Table 2: Answer to the research question: Availability of antenatal health care facilities and accessibility to ANC services**

S/N	Items	SA	A	D	SD	N
1.	Lack of 24 hours coverage hinders ANC services accessibility among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria	201 (50.2%)	105 (26.3%)	73 (18.3%)	21 (5.3%)	400
2.	Poor supply of quality drugs hinders ANC services accessibility among pregnant women in Internally Displaced	203 (50.7%)	99 (24.8%)	78 (19.5%)	20 (5%)	400

Persons' (IDPs) Camps in Borno State, Nigeria.						
3.	Lack of adequate skilled staff hinders ANC services accessibility among pregnant women in Borno State, Nigeria.	205 (51.2%)	93 (23.3%)	84 (21%)	18 (4.5%)	400
4.	Lack of emergency obstetric care hinders ANC services accessibility among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria.	207 (51.7%)	87 (21.8%)	90 (22.5%)	16 (4%)	400
<b>Column Total</b>		<b>816</b>	<b>384</b>	<b>325</b>	<b>75</b>	<b>1600</b>

The Table 2 shows that, 201 (50.2%) of the respondents strongly agreed, 105 (26.3%) agreed, 73 (18.3%) disagreed, while 21 (5.3%) strongly disagreed that lack of 24 hours coverage hinders ANC services accessibility among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria. The table further revealed that 203 (50.7%) strongly agreed, 99 (24.8%) agreed, 78 (19.5%) Disagreed, 20 (5.0%) strongly disagreed that poor supply of quality drugs hinders ANC services accessibility among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria. It is also indicated that lack of adequate skilled staff hinders ANC services accessibility among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria as 205 (51.2%) of the respondents strongly agreed, 93 (23.3%) agreed, 84 (21.0%) disagreed while only 18 (4.5%) strongly disagreed. Similarly, lack of emergency obstetric care hinders ANC services accessibility among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria as the above table showed 207 (51.7%) of the respondents strongly agreed, 87 (21.8%) agreed, were 90 (22.5%) disagreed and 16 (4.0%) strongly disagreed.

**Hypothesis:** Availability of antenatal health care facilities is not a significant factor affecting the accessibility to ANC services among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria.

**Table 3: Chi-square analysis showing the availability of antenatal health care facilities as a factor affecting the accessibility to ANC services among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria**

S/N	Items	SA	A	D	SD	N	df	Cal. $\chi^2$	Crit. Value	Decision
1.	Lack of 24 hours coverage hinders ANC services accessibility among pregnant women in Internally Displaced Persons' (IDPs)	201 (50.2%)	105 (26.3%)	73 (18.3%)	21 (5.3%)	400				

Camps in Borno  
 State, Nigeria

2.	Poor supply of quality drugs hinders ANC services accessibility among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria.	203 (50.7%)	99 (24.8%)	78 (19.5%)	20 (5%)	400				
3.	Lack of adequate skilled staff hinders ANC services accessibility among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria.	205 (51.2%)	93 (23.3%)	84 (21%)	18 (4.5%)	400	9	1342.7	16.92	Ho Rejected
4.	Lack of emergency obstetric care hinders ANC services accessibility among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria.	207 (51.7%)	87 (21.8%)	90 (22.5%)	16 (4.0%)	400				
	<b>Column Total</b>	<b>816</b>	<b>384</b>	<b>325</b>	<b>75</b>	<b>1600</b>				

### **0.05 alpha level**

The finding from the analysis in Table 2 shows that the calculated  $\chi^2$  value was 1342.7 and the table value was 16.92 with the degree of freedom 9 at 0.05 alpha levels. Since the calculated value of 1342.7 was greater than the table value of 16.92, then, the hypothesis was rejected. This means that, lack of 24 hours' coverage, poor supply of quality drugs, lack of adequate staff and lack of emergency obstetric care negatively affected accessibility to ANC services among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria.

### **Discussion of the Findings of the Study**

The result of the tested hypothesis two revealed that, non-availability of antenatal health care facilities in rural areas negatively affects the accessibility to ANC services among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria. This finding corroborates with Odogwu, et al. (2010); WHO and FMOH (2009) that none of the Primary Health Care facilities was able to perform basic emergency obstetric care services. In terms of skilled personnel and material resources, all the PHCs fell significantly short of national standard of at least four midwives per centre. Nigeria's health system functioning was ranked 187th out of 191 countries. Assistance from doctors was four times more likely in urban areas than in rural areas, and the available health services are characterized by inefficiency, wasteful use of resources and low quality of services. The result is further buttressed by Awoyemi, et al. (2011) that there is unequal distribution of health facilities as well as low level of accessibility of patient to medical facilities in the study area. The result of indices of accessibility to public health care facilities shows that there is an average of 111, 20, 61 and 6 patients to a doctor, a nurse, a community health worker and a hospital bed respectively. The inadequacies in the accessibility of health facilities have reduced the life expectancy of rural inhabitants and increased infant mortality.

### **Conclusion**

Based on the findings of this study, it has been concluded that, non-availability of antenatal care services negatively affects the accessibility to ANC services among pregnant women in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria.

### **Recommendations**

It is recommended that antenatal care facilities and services should be available at all time in various clinics with other consumables and emergency obstetric care services in Internally Displaced Persons' (IDPs) Camps in Borno State, Nigeria.

## REFERENCES

- Awoyemi, T. T., Obayelu, O. A. & Opaluwa, H. (2011). Effects of distance on utilization of health care services in rural Kogi State, Nigeria. *Journal of Human Ecology*, 35 (1), 1-9.
- Federal Ministry of Health, (FMOH) Nigeria, (2015) National Strategic Health Development Plan, Abuja, Nigeria. Retrieved from <http://www.mamaye.or2/sites./defaultfiles/evidence/NSHDP-2010-2015>. Accessed on 12 February 2016.
- Federal Ministry of Health, National Population Commission (Nigeria) and ICF 'International (2014). Nigeria Demographic and Health Survey 2013. Abuja, Nigeria.
- World Health Organization & Federal Ministry of Health, Nigeria (2009). Saving Newborn Lives in Nigeria: Newborn Health in the Context of the Integrated Maternal, Newborn and Child Health Strategy Abuja. Save the Children, 7-8.
- Odogwu, K., Audu, O. , Baba L. S., Bawa, Cl., Tukur, B., Ejembi, C., Adaji, S. & Shittu, O. (2010). Availability and utilisation of emergency obstetric care services in three communities in Kaduna State, Northern Nigeria. *African Journal Q/ Reproductive Health*, 14(3), 85.
- World Health organization (2016) [http : //www.who.int/mediacentre/news/releass/2016/ antenatal-care- guidelines/en/](http://www.who.int/mediacentre/news/releass/2016/antenatal-care-guidelines/en/). Accessed on 11 November 2016.