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**Study Topic:**

Challenges in the provision of maternal health in public health facilities in Juba

**Overall Goal of the Research:**

* To establish facts on the challenges faced in provision of maternal health services in public health centers in Juba for 12 months.

**Specific Objectives:**

1. To document the level of engagement at the public health centers in delivering the six years World Health Organization Country Cooperation Strategy (WHO – CCS) for South Sudan ending 2019.
2. To document the extent to which the government and partners have implemented the national health policy 2016 to 2026.
3. To identify the gaps that requires attention for effectiveness and efficiency in delivery of maternal health services in public health centers in Juba.

**Background to the problem:**

The global maternal mortality ratio (MMR) has dropped by 44% in the last 25 years. This decline varies widely between low and high-income countries. Low-income countries contribute 99% of the maternal deaths in the world, and sub-Saharan Africa accounts for 66% of these deaths. Often, maternal deaths are due to direct obstetric causes such as postpartum hemorrhage, obstructed Labour, sepsis, unsafe abortion, and hypertension. These complications can be mitigated by encouraging mothers to give birth at health facilities with the help of skilled birth attendants. Mothers who give birth at health facilities are also less likely to die or lose their new-borns. Reduction of mortality in health facility births is, largely, due to skilled health workers’ ability to prevent, treat, or control fatal obstetric and neonatal complications. South Sudan has one of the highest MMR and neonatal mortality rates (NMR) in the world. The MMR was estimated to be 800 per 100,000 live births in 2015, while the NMR was about 39 per 1000 live births in the same year. These ﬁgures are probably higher in rural areas and those involved in the civil war.

The South Sudan Demographic Household survey in 2010 report showed that only 12% of mothers used health facilities during childbirth with skilled birth attendants. For South Sudan to meet the targets of the third Sustainable Development Goal (SDG) of reducing the MMR to less than 70 per 100,000 live births, and the neonatal mortality rate to less than 12/1000 live births interventions that reduce both maternal and neonatal mortality and morbidity must be implemented. One such intervention is scaling up health facility births and skilled birth attendance.

To design interventions that promote health facility births in South Sudan, up to date context-speciﬁc data are needed. This research will therefore collected an up to- date data on the challenges being faced in the provision of Maternal health services in the public health facilities in Juba.

**Rationale:**

South Sudan has a high maternal mortality ratio estimated at 800 deaths per 100,000 live births. Birth in health facilities with skilled attendants can lower this mortality. In this cross-sectional study, we will determine the level and factors of health facility utilization and skilled birth attendance in Jubek State, South Sudan. Mothers of children aged less than two years will be interviewed in their homes. Multivariable regression analysis will be performed to determine factors associated with health facility births.

According to recent findings, only a quarter of the mothers had given birth at health facilities, 209/810 (25.8%; 95% CI18.2–35.3) and 207/810 had a skilled birth attendant (deﬁned as nurse, midwife, clinical oﬃcer, or doctor). Factors positively associated with health facility births were four or more antenatal visits (adjusted odds ratio (AOR) 19; 95% CI6.2, 61), secondary or higher education (AOR 7.9; 95% CI 3, 21), high socio-economic status (AOR 4.5; 95% CI 2.2, 9.4), and being primipara (AOR 2.9; 95% CI 1.5, 5.4). These ﬁndings highlight the need for eﬀorts to increase health facility births in South Sudan.

This research will therefore;

* Provide a check on the current situation of the public health facilities in Juba compared to the previous years.
* Underscore the challenges of provision of public health services in Juba as it relates to maternal health.
* Propose redress mechanism as per the South Sudan maternal health policy document 2016 to 2026.
* Enlist the contribution of private sector, non-governmental organizations and faith institutions in enhancing quality service provision in the public health facilities.

**Outline of the proposed sample group, including any specific criteria:**

The sample group will include seven public health workers whose task is proportional to the provision of maternal health services in the following category;

* Mid-wives from Public Primary health Centers in Juba
* Traditional Birth Attendance from Primary health Units in Juba
* Nurses from Primary health centers in Juba
* Administrators from the Ministry of Health department of Reproductive Health
* Doctors from Public referral hospital
* Academician from University of Juba, faculty of Medicine and health science
* Humanitarian worker from health cluster

**Description of the proposed sample group formulated and process:**

A call for representatives will be sent out to targeted groups and communities in the areas of representation identified, and through the use of cascading methods. This will include special interest and professional groups, and cascades through senior strategic managers and group Chairs. The sample population will be formulated using the stratified sampling method according to their; Gender, Level of education, Experience in service delivery, Specialization in the field of survey.

**The involvement of the sample group will be in the research**

The main purpose of the focus group is to reach a consensus agreement which will inform the development of the questionnaire. The results of the focus group will be used to develop the survey which will then be sent out to a large representative sample group of maternal health workers working in the seven different contexts of maternal health identified.

**How the consent of participants will be obtained.**

Participants will be sent an information sheet and consent form giving full details of the study (see attached). Participants will be sent this information by email and asked to bring a signed copy on the day the focus group runs.

**Potential of risks to subjects and how to minimize them:**

Participation in this focus group presents no potential risks to the participants. Participants and their institutions will not be named in subsequent write ups and material submitted to the university.

**Anonymity and confidentiality of the subjects:**

Participants and their institutions will not be named in subsequent write ups and material submitted for publication.

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**RESEARCH CONSENT FORM**

**Title of study**

* Challenges in the provision of maternal health in public health facilities in Juba

**Please read and complete this form carefully. If you are willing to participate in this study, ring the appropriate responses and sign and date the declaration at the end. If you do not understand anything and would like more information, please ask.**

1. I have had the research satisfactorily explained to me in written form by the researcher.   
   **YES / NO**
2. I understand that the research will involve: The completion of an electronic survey on the topic of research “Challenges in the provision of maternal health in public health facilities in Juba”.

**YES / NO**

1. I understand that I may withdraw from this study at any time without having to give an explanation.  
   **YES / NO**
2. I understand that all information about me will be treated in strict confidence and that I will not be named in any written work arising from this study  
   **YES / NO**
3. I understand that any data collected will be used solely for research purposes and will be erased on completion of your research.  
   **YES / NO**
4. I understand that the data will only be discussed within the research team

**YES / NO**

1. I understand that survey participants and their respective institutions will not be named in subsequent write ups and material submitted for publication

**YES / NO**

1. I freely give my consent to participate in this research study and have been given a copy of this form for my own information.

**Signature: ………………………………………………………**

**Name (capital letters)…………………………………………..**

**Date: ……………………………………………………………**

**Contact details: (include address, email and telephone number)  
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***Thank you for your interest in the study.***