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AWARENESS AND UTILIZATION OF MATERNAL HEALTH INFORMATION SERVICES AMONG RURAL WOMEN ATTENDING ANTENATAL CARE CLINIC IN ANAMBRA STATE

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ABSTRACT

This study determined the awareness and utilization of maternal and child health information services among rural women attending antenatal clinic in Anambra state, Nigeria. The study was guided by two objectives and two research questions. Multistage sampling procedure was employed to select 256 respondents for the study. A well-structured questionnaire was used to collect data for the study from the respondents. Data collected was analyzed using descriptive statistics. Majorities (81%) of the respondents were aware of maternal and child health information services among rural women (MCHIS), only (19%) of the women were not aware. The mostly utilized MCHIS in their descending order were; the use of information on essential drugs to know the right drugs to use with 3.84, use of curative information to seek for the right care with 3.78 and use of mental health information to know the effect of substance and alcohol abuse on the mental development of the child and mother with 2.60 as the least utilized and overall average of 3.33 showing positive response. The study concluded that there is still need for continuous mass public education to expose them to underlying health risks associated with pregnancy complications.

Keywords: Awareness, utilization, maternal health, child health, health information, rural women

Introduction

Ignorance of the law as they say is not an excuse. Someone who is unaware of an idea or fact tend to fall victims of punishments accrued to mistakes. To be informed is to be armed in other words to be aware is to be informed and empowered about happenings within and outside one's immediate environment and most people especially the rural women seem to fall victim of this in other words most are unaware of many relevant health information and practices within their disposal as expectant mothers.

Emphatically, the health of every mother and child matters a lot owing to the fact that they contribute a lot to humanity and without them; human existence will be heading to extinction. This was highlighted by the Office of Disease Prevention and Health Promotion (2020), when they mention that the health of mothers, newborns and children affects the health of future generations and could be used to foresee threats to public health of families, communities and the healthcare system. While Kumar (2017) explain that mothers and children are the most vulnerable members of society and need assistance to maintain good health at all

times. In agreement, Mulauzi and Daka (2018) mentioned that women in African are significant economic drivers and that maintaining their health is essential for the continent's long-term sustainable economic growth. The health of maternal and child is a matter of concern that cuts across every sector of the society. According to research, mothers and children are the bedrock of every national development with evidence that they make up the larger proportion of every nation's population and are the keystone upon which the continuity of human existence lies. In support of the aforementioned, World Health Organization (WHO) (2018) confirms that the foundation of a nation's human capital is good health and no nation can afford to provide hazardous or low-quality healthcare.

The quality of healthcare information and services given to these women will to an extent determine the state of health of the future generation. Because, every action taken by a person is actually propelled by the state of their knowledge about such matter or quality of information such person is armed with or possess. According to WHO (2018), in order to promote social cohesion, increase economic productivity and lessen expenses and burdens on families, communities, service providers and the government coffers, rural women need to be armed with the right and relevant health information on health management. Apparently, according to United Nation Women's report (2021) rural women are the key agents for achieving transformational economic, environmental and social changes required for sustainable development, and on this same note Ogbalu (2009) mention that mothers and children make up a large section of the global population and are particularly susceptible to numerous diseases that affect people and have high death. Also, Organization for Economic Co-operation and Development, WHO and World Bank (2018) express that low-quality healthcare services impend improvement of health in nations of all income levels. As well according to research, a country's development greatly depends on the health of its populace with special emphasis placed on the wholesomeness of their health at all-time including examination of their physical, emotional, psychological, spiritual and social well-being. This cannot be achieved without well-articulated relevant health information that is channeled towards meeting the health information needs of these women and children. Consequently, WHO (2018) stress that skipping out on maternal health investments will not only diminish our humanity but as well expose the level of penury and reprobates in our society which in turn undermine societal development and progress. In other words, relevant health information is one of the things that inform these women's health decision either positively or negatively. It contributes to what engineers their lifestyle as well as their well-being without exception of lifespan.

The state of health of any individual depends on the amount and quality of health information possessed by such an individual minus ignorance. This is because the reaction of people towards health issues is a matter of fact determined by the quality of health information they receive. Health information in the words of American Health Information Management Association (2021), is the data related to a person's medical/health history, including symptoms, diagnosis, procedures and outcomes. It is that which enables the

medical practitioners to know the right approach to take on a health matter at any point in time. It provides data on health management of an individual thereby providing a meaningful link between one's present health state and that of the past. It as well provides data set that can be used to understand how a population's health has changed and how medical interventions can change health outcomes. On the other hand, health information gives rural women opportunity to make best health decisions for themselves and that of their children. In the words of Mwangalaka (2021), health information services are critical because they influence how each pregnancy turns out. One of the important aspects of public health is to improve the wellness of rural women and their children by giving them the care they need to prevent and reduce the causes of maternal sickness and mortality.

The life and survival of every pregnant woman and her child depends so much on the quality and quantity of care given to them. According to Sanda (2014) a mother's health is closely related to that of her child's and the family's overall and the death of a mother can have a devastating effect on the entire family and endanger the survival of any remaining children. Consequently, Ani & Ezeugwu (2014), assert that women's health includes safe motherhood, family planning information and services, prevention and management of diseases, immunization, elimination of harmful practices, provisions of safe water, sanitation, and provision of drugs and treatment of illnesses. While Taiwo, Yekinni & Thomas (2018) are of opinion that maternal health is the care given to women during preconception, conception and postnatal period to reduce maternal mortality and morbidity. Such care may include antenatal care, delivery care and postnatal care services. Quality of these health services provides better health outcomes for both mother and children through preventive care and the identification and treatment of complications. These cares cannot be obtained without having the right health information on how to obtain such services. The right health information will enable them know when, how, and where to seek for right health care for themselves and their children. This is necessary because of the numerous diseases and health issues that affect childbearing women and their children. According to the Office of Women's Health (2019) such health issues could be in form of infections such as bacterial vaginosis, cytomegalovirus, influenza, listeriosis, parvovirus B19, toxoplasmosis, urinary tract infection, yeast infection, Group B strep or they may likely be in form of pregnancy issues like ectopic pregnancy, fetal problems, gestational diabetes, high blood pressure, hyper emesis gravid arum, placenta previa, placenta abruption, preeclampsia, preterm labor, depression, anemia or miscarriage (Center for Disease Prevention and Control, 2021). They may even come in form of childhood killer diseases such as malaria, measles, diarrhea, whooping cough, dysentery, tetanus, smallpox, and poliomyelitis.

Health they say is wealth. A healthy person is synonymous to a contributing member of the society. Health according to Oleribe, et, al. (2018) is a state of having overall physical, mental, emotional, and social abilities to add values not just to one's self, but to society, resulting in the development of a better and sustainable world where things work, people live in harmony and community existence is

enhanced. As stated, this healthy state can mostly be attained by providing proper maternal health information services to these women and encouraging others to pursue excellent health. The construction of a quality and efficient healthcare system, as well as healthcare information services offered throughout the nation and its environs may assist in some way to attain the goal of maintaining excellent health at all times.

These maternal health information services may introduced during antenatal care services, delivery care services and postnatal care services or in a well-planned manner outside the days of these services which can be in form of mass maternal and child health education exploring various media possible by the health service providers and other agencies including library professionals. It will help in raising the women's awareness on maternal and child health issues exposing them to various dangers women and children faces in health and as well prepare the well very well for the motherhood journey. According to Mulugeta, Giru, Berhanu & Demelew (2020), birth preparation and complication readiness is a crucial part of safe motherhood programs to reduce delays and promote the timely use of skilled maternal and neonatal care especially during childbirth. Raising awareness among rural women about issues affecting their health and that of children will assist them in recognizing the danger signs of obstetric complication, the value of maternal health information services and the sole advantages of utilizing such services when need be.

Since the health, well-being, nutrition, and safety of mothers before conception, during pregnancy and after can have a significant impact on the birth weight, growth and survival of the child. Afia, Obot & Nsidibe (2022) express that awareness of health services has shown to be an important determinant of utilization of health services. Wessel (2019) mention that if the awareness is adequate and can be accessed in an efficient and effective way then that awareness could lead rural women at any level without a need for further processing but how the maternal and child health care awareness is delivered to women of reproductive age during hospital visits influences their motivation to seek for additional information. Equally, Henok (2015) assert that level of awareness of maternal and child health services influence how rural women of reproductive age approach and handle maternal and child health care information which include searching for it, modifying it, sharing it, hoarding it and even ignoring it. While Onasoga (2014) points that lack of knowledge about the existing maternal and child health services and acceptance of the services rendered are the major factor influencing its utilization. Mutowo, Yazbek, Wath & Manel (2021) stress that insufficient knowledge about pregnancy is one of the factors that prevent rural women from utilizing antenatal care services. Furthermore, Laar, Bekyieriya, Isang & Baguuna (2019) opinion that lack of health information to rural women stands as one of the reasons that influence the limited utilization of maternal health information services in the rural setting.

Despite the importance of maternal health information in promoting healthy pregnancies and reducing maternal and infant mortality rates, there is a significant gap in

awareness and utilization of these services among rural women. Many rural women are unaware of the available maternal health information services, including prenatal and postnatal care, family planning, immunizations, nutrition guidance, and childbirth education. This lack of awareness prevent them from accessing timely, and appropriate healthcare services leading to preventable health complications and poor maternal and child health outcomes.

Furthermore, the utilization of maternal health information services by rural women is significantly low due to various barriers. These include limited access to health care facilities, long distances to healthcare centers, lack of transportation, financial constraints, cultural beliefs and traditional practices and language barriers. These barriers further exacerbate the overall healthcare disparities and contribute to the higher rates of maternal and child mortality in rural areas.

Addressing the problem of low awareness and utilization of maternal health information services among rural women is crucial for improving maternal and child health outcomes. Effective strategies aimed at increasing awareness improving access to health care facilities, promoting community education programs, engaging traditional birth attendants, sensitizing communities on the importance of maternal health and providing culturally sensitive and accessible information materials are needed to bridge this critical gap and ensure that rural women receive the necessary support and information needed for a safe and healthy pregnancy. This study therefore studied the awareness and utilization of maternal health information services among rural women in Anambra West and Ayamelum local government areas, Anambra State.

Basically, this study addressed two main objectives

1. The awareness of maternal and child health information services among rural women in Anambra State.
2. The extent of utilization of maternal health information services among rural women in Anambra State

The study was guided by the following research questions:

1. What is the awareness of maternal and child health information services among rural women in Anambra State?
2. What is the extent of awareness of maternal and child health information services among rural women in Anambra State?

Research Method

This study adopted descriptive survey research design. Population of the study consisted of 726 of registered women attending antenatal care for the months of March and April in fourteen health centers. Data for this research was gotten from the Demographic and Health Survey (DHS). Multistage sampling procedure was employed to select 257 rural women attending antenatal care clinic from fourteen health care centers under Ayamelum and Anambra West local government areas. Proportionate stratified random sampling was used to select the respondents from the various healthcare centers. Percentage and mean were used to describe the data.

Results and Discussion

Awareness of Maternal and Child Health Information Services

Table 1 shows the percentage distribution of rural women based on their level of awareness of maternal and child health information services in rural areas of Anambra state. Out of the 232 respondents, 188 (81%) were aware of maternal and child health information services while 44 respondents representing (19%) of the respondents had low awareness. This implies that the women were aware of maternal and child health information services. The findings to this study revealed that rural women in Anambra West and Ayamelum local government areas in Anambra State that were very much aware of maternal and child health information services were about 188 (81%) as against 232 while 44 (19%) of them were not aware. The health information services range from; immunization information services, maternal, newborn and children information services including information on exclusive breast feeding, promotion of proper nutrition and balance diet for healthy growth of the children, tuberculosis care information services, curative care for mother and child information service among others. The study also revealed that most of the women were not aware of mental health information services going by the percentage of the respondents 168 (72%) against 232. In the area of lack of awareness, the health service providers need to work hand in hand with the medical psychologists during their outreach programme to educate the women on the aspect of mental health both for the mother and children. This finding corresponded with Afia, et al. (2022) who found out that most of the rural women in Akwa Ibom State were mostly aware of MCHIS and as shown in this study, the rural women were very much aware of MCHIS in the local government areas under study. The study of Abubakar, Sambo & Idris (2011) also supported the present finding which shows that there was high level of awareness of MCHS. Contrary, Biyyala, Moola, & Arepalli (2018) findings shown that there were inadequate knowledge of MCHS among the women in their study and advised for improved community awareness on maternal and child health services and information, education, and communication activities. In agreement, Shrivastava & Chaudhry (2016) suggested that awareness regarding three or more antenatal visit and registration of pregnancy in the first trimester should be emphasized, as well as health education and promotion of institutional deliveries be used to avert hazardous practices among the women.

Table 1: Distribution of Rural Women Based on Awareness of Maternal and Child Health Information Services

	Frequency	%
High Awareness (50 & Above)	188	81.0
Low Awareness (Below 50)	44	19.0
Total	232	100.0

S/N		Yes		No	
		Frequency	%	Frequency	%
1.	Family planning information services	160	69.0	72	31.0
2.	Immunization information services	232	100.0	0	0.0
3.	HIV/AIDs information services for precautionary measures	212	91.4	20	8.6
4.	Malaria information services for precautionary measures	212	91.4	20	8.6
5.	Personal hygiene practices health information services	214	92.2	18	7.8
6.	Maternal, newborn and childcare information services for exclusive breastfeeding	232	100.0	0	0.0
7.	Promotion of proper nutrition and balance diet for healthy growth	232	100.0	0	0.0
8.	Tuberculosis information service	230	99.1	2	0.9
9.	Curative care information services for both mother and child	228	98.3	4	1.7
10.	Essential drugs information services for both mother and child	206	88.8	26	11.2
11.	Water and sanitation information services	218	94.0	14	6.0
12.	Oral health information services	176	75.9	56	24.1
13.	Mental health information services for mothers	64	27.6	168	72.4
14.	Referral information services in case of emergency	228	98.3	4	1.7
15.	Postpartum health information services	218	94.0	14	6.0
16.	Child growth monitoring health information services eg. weight, height	194	83.6	38	16.4
17.	Proper waste disposal information services	210	90.5	22	9.5

Utilization of Maternal and Child Health Information Services

The mean ratings displayed in Table 3 indicates that rural women utilize the maternal and child health information services to a high extent as shown by the overall mean rating of 3.33. The item by item mean ratings show that, to a high extent, the rural women utilized each of the services to a high extent as demonstrated by the mean ratings which ranged between 2.60 and 3.84 which were all greater than 2.50. The findings revealed that the rural women utilizes maternal and child health information services to a very high extent based on the overall mean rating obtained to be 3.33. This shows that the rural women know the value and power of relevant health information to their health and that of the children. This present study findings was in line with the

findings of a study carried out by contradicts the findings of the study carried out by Anate, Balogun, Olubodun, &Adejimi (2021) which revealed that over 90% of the women have heard of family planning and are utilizing it. While the same findings contradicts that of Pamidi, Geddam, & Parthasarathy (2021) which revealed that access to maternal and child health services for women who belong to poor economic background were limited. Then Karuna, Bhaskari, & Harika (2018) suggested that utilization of maternal and child health information services can be improved through incessant contact of health workers with pregnant women.

Table 2*: *Mean Responses on the Extent of Utilization of Maternal and Child Health Services by Rural Women in Anambra State N=232

S/N		Mean	SD	Remark
1.	Information on family planning enable me to know how to space my childbirth and prevent unwanted pregnancy	2.91	.96	HE
2	I use information on immunization to protect my baby from childhood killer diseases	3.43	.88	HE
3	I use information about HIV/AIDs to prevent mother to child transmission especially when tested positive of the diseases	3.34	.90	HE
4	I use information on malaria prevention and treatment to take care of myself and my baby when sick from malaria	3.70	.51	HE
5	I use maternal, newborn and childcare information services to stay healthy throughout my pregnancy stage and care for my baby after delivery. E.g. Exclusive breastfeeding	3.41	.81	HE
6	I use information on proper nutrition and food education to balance my diet and that of my baby.	3.28	.86	HE
7	I use information on personal hygiene practices to maintain my cleanliness	3.31	.91	HE
8	I use information on tuberculosis to seek for the right treatment for my children	3.36	.66	HE
9	I use curative care information to seek for the right care for myself and my child	3.78	.54	HE
10	I use information on water and sanitation to protect myself and my baby from waterborne diseases	3.35	.90	HE
11	I use information oral health information to take care of myself and baby's dental problem.	3.19	.79	HE
12	I use mental health information to know the effect of substance and alcohol abuse on the mental development of the child and the mother.	2.60	1.00	HE
13	I use referral information services to know where to seek for health care in times of critical health issues of emergency	3.65	.71	HE
14	I use information on to dispose my refuse properly and to prevent disease infestation for myself and my baby	3.28	.92	HE
15	I use health information services on child growth monitoring to know the progress in the growth of my child	2.94	.94	HE

16	I use information about essential drugs to know the right drugs to use for myself and that of my babies	3.84	.52	HE
17	I use health information services on postpartum to go for my check up after my child delivery	3.28	.89	HE
	Overall Mean: Utilization of Maternal & Child Health Information Services	**3.33**	**.53**	**HE**

Conclusion and Recommendations

In conclusion, the study shows positive responses about the awareness and utilization of maternal and child health information services among rural women in Anambra State, although from the various items mentioned their degree of responses differ from one another showing that some are well known and utilized than the others and for this reason, there is need for continuous enlightenment of these women; to expose them to underlying health risks associated with pregnancy complications and furnish them with relevant maternal and child health information at all time through healthcare centers established within the rural communities.

REFERENCES

Abubakar, A., Sambo, M. N., & Idris, S. H. (2011). Awareness and utilization of antenatal care services and delivery services in rural community, Northwest, Nigeria. *Kanem Journal of Medical Science,5(2);43-49.* Retrieved from: https://www.ajol.info/index/kjms/article/view/224195 on 28 September 2023

Afia, U. U., Obot, V. O., & Johnson, N. I. (2022). Awareness and utilization of maternal and child health services among women of reproductive age in rural areas of Akwa Ibom State, Nigeria. *International Journal of Nursing, Midwife and Health Related Cases, 8(4);1-19.* Retrieved from https://www.eajournals.org/ on 9th December 2023

Anate, B. C., Balogun, M. R., Olubodun, T., Adejimi, A. A. (2021). Knowledge and utilization of family planning among rural postpartum women in Southwest, Nigeria. Journal of Family Medicine and Primary Care, 10(2):730-737. Retrieved from; doi.10.4103/jfmpc.jfmpc_1312_20

Ani, N. R. & Ezeugwu, J. A. (2014). Barriers to meeting the primary healthcare information needs of rural women in Enugu State, Nigeria, West Africa. *Journal of Education and Practice, 5(30);46-51*. Retrieved from URL: https://www.iiste.org on 3rd April 2022

Biyyala, R., Moola, R. S. R., & Arepalli, S. (2018). Awareness about mother and child health services among tribal women of reproductive age group in Kurnool division of Kurnool district, Andhra Pradesh. *International Journal of Community Medicine and Public Health,5(7);3111-3115.* Retrieved from: https://www.ijcmph.com/index.php/ijcmph/article/view/3126 on 28 September 2023

Henok, A, Worku, H., Getachew, H. & Workiye, H. (2015). Knowledge, attitude and practice of antenatal care service among married women of reproductive age group in Mizan Health Center, South West Ethiopia. *Journal of Medicine, Physiology and Biophysics,16,53-58.* Retrieved from URL: https://www.researchgate.net/publication/282604119_knowledge_Attitude_and_Practice_of_Antenatal_Care_Service_among_married_women_of_reproductive_age_group on 17th July 2023

Karuna, M. K., Bhaskari, K., & Harika, S. (2018). Maternal health care utilization in rural field practice area of Dr Psims and Rf, Krishna district, Andhra Pradesh, South India. *Journal of Evolution of Medical and Dental Science, 7(51);5407-5410.* Retrieved from URL: https://jemds.com/data-pdf/2-karuna-k-dec-17-odf on 8th August 2022

Kumar, S.R. (2017). Knowledge on Utilization of Maternal and Child Health Services among Rural Married Women. *International Journal of Research and Review,4(5);110-113. Retrieved from URL:* https://www.ijrrjournal.com/IJRR-vol.4-issues.5-may2017/IJRR0019.pdf on 7 March 2023

Laar, A. S., Bekyieriya, E., Isang, S., & Baguune, B. (2018). Assessment of mobile health technology for maternal health services in rural upper west region of Ghana. *The Royal Society for Public Health, 168;1-8*. Retrieved from DOI: https://doi.org/10.1016/j.puhe-2018-11-04 on 4th June 2023

Mulauzi, F., & Daka, K. (2018). Maternal health information needs of women: a survey of literature. *The Journal of Lexicography and Terminology. 2(1):57-82*. Retrieved from URL: (PDF) MATERNAL HEALTH INFORMATION NEEDS OF WOMEN: A SURVEY OF LITERATURE (researchgate.net) on 5th September 2022

Mulugeta, K.A., Giru, W. B., Berganu, B., & Demelew, M. T. (2020). Knowledge about birth preparedness and complication readiness and associated factors among primgravida women in Addis Ababa, Ethiopia, 2015. *Reproductive Health Journal, 17(15);1-13. Retrieved from DOI:* https://doi.org/10.1186/s12978-020-0861-z on 3rd September 2022

Mutowo, J., Yazbek, M., Wath, A. V, & Maree, C. (2021). Barriers to using antenatal care services in a rural district in Zimbabwe. *International Journal of Africa Nursing Sciences,15;2214-1391*. Retrieved from DOI: https://doi.org/10.1116/j.ijans.2021.100319 on 2nd February 2022

Mwangakala, H. A. (2021). Accessibility of maternal health information and its influence on maternal health

preferences in rural Tanzania: a case study of Chamwino District.*SouthAfrica. Journal of Information Management,23(1);1353*. Retrieved from DOI: https://doi.org/10.4102/sajim.v23i1.1353 on 14th March 2022

Office of Disease Prevention and Health Promotion (2020). Maternal, infant and child health. Retrieved from URL: https://www.healthypeople.gov/2020/leadinghealth-indicator/2020-ihi-topics/maternal-infant-and-child-health on 14th November 2021

Office of Women's Health (2019) You're pregnant: now what? Retrieved from URL: https://www.womenhealth.gov/pregnancy/you're-pregnant-now-what/pregnancy-complications#:text=health%20problem%20during%20pregnancy%20%20%20problembe%20pre%20%20%208%20more%20rows%20 on 14th November 2021

Ogbalu, A. I. (2009). *Maternal and child health education.* Onitsha: Varsity Press Ltd. Viii+117pp.

Oleribe, O.O., Ukwedeh, O., Burstow, N.J., Gomaa, A.I., Sonderup, M.W., Cook, N., Waked, I, Spearman, W., & Taylor-Robinson, S.D.(2018). Health: redefined. *Pan African Medical Journal,30;292*. Retrieved from DOI: https://dox.doi.org/10:11604/pamj.2018.30.292.15436 on 4th November 2021

Organization for Economic Co-operation and Development, World Health Organization, & World Bank. (2018). Delivering quality health services: a global imperative for universal health coverage. Retrieved from URL: https://www.worldbank.org/en/topic/universalhealthcoverage/publication/delivery-quality-health-services-a-global-imperative-for-universal-health-coverage on 2nd November 2021

Pamidi, S., Geddam, B. J., & Parthasarathy, N, (2021). A study on utilization of antenatal care services in the rural area of West Godavari District, Andhra Pradesh. *Global Journal for Research Analysis, 10(10): 2277-8160*. Retrieved from DOI: https://dx.doi.org/10.36106/gjra on 10th December 2021

Sanda, U. H. (2014). Media awareness and utilization of antenatal care services by pregnant women in Kano State Nigeria. *Journal of Social Science Studies. 1(2)85-111*. Doi: 10.5296/

Shrivastava, D., & Chaudhry, P. (2016). Awareness and utilization of maternal and child health services among selected eligible rural women of Wardha district. *International Journal of Current Research,8(4);29500-29503.* Retrieved from: https://www.journalcra.com/article/awareness-and-utilization-maternal-

and-child-health-services-amongst-selected-eligible-rural on 28 September 2023

Taiwo, A. O., Yekinni, O. T. & Thomas, K. A. (2018). Perceptions of use of maternal healthcare services in rural communities of Osun State. Nigerian journal of rural extension and development.

Wessel, H. F. (2019). Death among women of reproductive age in Cape Verde: causes and avoidability. Acta Obstetric et Gynecologica Scandinavica, 78(3);225-232. Retrieved from URL: https://www.africabib.org/rec.php?RID=W00099518&D8=w on 21st July 2023

World Health Organization (2018). Low quality healthcare is increasing the burden of illness and health costs globally. Retrieved from URL: https://www.who.intnews/item/05-07-2018-low-quality-healthcare-is-increasing-the-burden-of-illness-and-health-costs-globally on 10th September 2022