Socio-Cultural Determinants of Nursing Mothers Utilization of Infant Welfare Clinic in Iwo Local Government of Osun State

By

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Abstract

This study examined socio-cultural determinants of Nursing Mothers Utilization of Infant Welfare Clinic in Iwo Local Government Area, Osun state. Hypotheses were based on the variables of poverty/low economic status, proximity to the clinic, marital status and cultural belief. The primary data were obtained from a cross section of 200 women, drawn from four infants' clinic across the Local Government Area. The data was collected with a questionnaire and analysis was done with simple percentages for demographic information while inferential statistics of chi-square (χ^2) was used to test the hypotheses at 0.05 Alpha level. The study found that majority of women were age between 18 and 40 years (86.0%), 53.5% were married before childbirth, while 44% gave birth before marriage. 71% claimed they were Christian, while the dominant occupation using the women include trading (42%) farming (32.5%) and civil servant (25.5%). The findings of the results revealed that response of the respondents varied significantly across all factors (poverty/low economic status, proximity to the clinic, marital status and cultural belief). All the hypotheses were rejected and all the factors confirmed as the factors as determinants of infant welfare service patronage among nursing mothers in Iwo Local Government Area, osun state. In view of the above, the researcher therefore recommended that the health care facilities need to be provided in rural communities of Osun State, so as to meet the objectives of primary health care which are accessible, available and affordable for rural women to address the problem of proximity and poverty. There is need for health education awareness programme by government and non-government organization to change orientation on common cultural practices of female genital mutilation, reproductive problems, early marriage and food restriction for women during pregnancy and labour.

Introduction

Infant welfare services are one of the services available at the clinic under the child health services which is an essential element of maternal and child health services. Infant welfare services in medical circle are frequently called "under-five" services (Yalya, 2004). Experience has shown that these groups of children are vulnerable to disease than older children and need extra care and attention. The services are essential for both mother and infant but the main purpose is to promote health, prevent disease among children and these are achieved through various activities which take place at the infant welfare clinic.

World Health Organization (WHO, 2012) report shows that infant morbidity and mortality is higher in women living in rural areas and among poorer communities. They further asserted that reduction in death among infant could be achieved through utilization of infant welfare clinic services.

It is now a deliberate policy on the part o the government that the infant welfare clinic services should be made

entirely free because of the importance of these services and it is designed to reduce infant morbidity and mortality rate. After the birth of the baby, the infant is brought periodically to the infant welfare clinic for further care. This type of care covers the whole cycle of child rearing in the family, which is aimed at keeping the infant well. Feeding and methods of feeding are taught the nursing mothers.

Immunization is freely given at age of birth in series till the baby is nine months. Diseases of childhood are prevented as well as treated when present. In most rural areas, mothers believe that a child is to be taken to an infant welfare clinic only when sick. They do not appreciate the need for health supervision nor the time spent at the clinic for useful information needed from time to time in caring for infant (Akinsola, 2006). A child that is exposed to the infant welfare clinic service has the opportunity being protected against diseases that subject him to death and reduced the rate of infant mortality; this encouraging a child to become useful being in the society, hence there is need to encourage utilization of infant clinic by examine those factors that actually determine its utilization.

Poverty has significant implications on health and development of household generally as well as poor access to information especially in the rural areas where infant mortality rate is higher than urban areas, it was reported that infant morbidity and mortality level is much higher in women with low economic status which limits their access to infant welfare service (WHO, 2005).

Proximity and transport issues in rural areas are highly significant indices affecting mother's access to health services especially in emergency care. Even if attempt is made to get to the hospital for treatment, they may arrive too late for the lives of their children to be saved because of poor roads and distance which may lead them to opt for alternatives like traditional birth homes or usage of local herbs and this may lead to maternal mortality (Akinsola 2006).

Nigeria Demographic Health Survey (NDHS) (2009), revealed that women reported various problems in accessing health care, it was reported that various indices are critical determinants of mother's utilization of health care services, these include marital status, broken home and inability of women to take independent decision about their lives especially where their husbands did not support the decision to seek appropriate health care for themselves.

Cultural practices and beliefs of nursing mothers are harmful to their reproductive health status and infant welfare such as belief in effectiveness of local herbs, practice of female genital mutilation and traditional or native doctor's patronage which have contributed greatly to maternal and infant mortality (Ogbuagu, 2004)

A child that is exposed to the infant welfare clinic service has the opportunity of being protected against diseases that subject him to death which in turn reduce infant mortality. It is on this premise that the study examined socio-cultural determinants of nursing mother's utilization of infant welfare clinic in Iwo local government areas of Osun State.

Statement of the problem

Health problems of the "under five infant" or pre-school child is part of the Millennium Development Goal which was adopted to reduce infant mortality among nursing mothers despite all the awareness programme embarked upon by the government, corporate bodies

and NGOS to find a lasting solution to these child health menaces, utilization of infant welfare clinic is still very low among nursing mothers (Adetoro, 2011). Studies have documented illiteracy, religion and lack of awareness as factors inhibiting nursing mother's utilization of infant welfare clinics to the exclusion of the connection between socio-cultural factors such as poverty/low economic status, proximity to the clinic marital status and cultural belief as determinant of nursing mother's utilization of infant welfare clinic.

Therefore the study investigated the socio-cultural determinants of nursing mother's utilization of infant welfare clinic in Iwo local government areas of Osun State.

Hypotheses

The following hypotheses were tested:

1. Poverty/low economic status will not significantly influence nursing mother's utilization of infant welfare clinic in Iwo Local Government Area, Osun State.
2. Proximity to the clinic will not significantly influence nursing mother's utilization of infant welfare clinic in Iwo Local Government Area, Osun State.
3. Marital Status will not significantly influence nursing mother's utilization of infant welfare clinic in Iwo Local Government Area, Osun State.
4. Cultural belief will not significantly influence nursing mother's utilization of infant welfare clinic in Iwo Local Government Area, Osun State.

Significance of the study

The findings of this study would serve as a source of information to broaden the knowledge of the community on the socio-cultural determinants of nursing mothers utilization of infant welfare clinic in Iwo local government area of Osun State. Findings from the study would also serve as an eye opener to the government at various level and all stakeholders in provision of infant welfare services on the areas to be addressed for infant welfare services to achieve their set objectives. It would also provide positive orientation to individuals on the harmful cultural practices that can lead to infant mortality.

Methodology

A descriptive survey research design was used for this study, the population for this study comprised of all women with childbearing age attending infant welfare clinic in Iwo Local Government Area, Osun State, while the two hundred respondents were used for the study.

The main research instrument used for this study was a self-structured questionnaire, which comprised of two sections (A and B). The "A" section was designated to elicit the demographic information of the respondents while section "B" evenly dealt with the established variables for this study; and the questionnaire was a close-ended type designed in line with modified Likert 4 point scale: Strongly Agreed (SA); Agreed (A); Strongly Disagreed (SD); Disagreed (D). The questionnaire was validated by experts in the field of health education, their observations and corrections were considered.

The validated instrument was administered on thirty (30) nursing mothers in Lagelu local government of Oyo State who were not part of the respondents and the response were coded and analysed through Cronbach alpha to test the internal consistency of

the instrument and it yield r-value of 0.82. After which the questionnaires were administered to the respondents at infant welfare clinic and collected immediately by the researcher after completion in order to ensure a substantial return of the forms. These were carefully arranged and analysed. The completed questionnaires were collected, coded and analysed using frequencies and percentages for the demographic data of the respondents. The inferential statistics of chi-square (x^2) set at 0.05 alpha level of significant was used to test the hypotheses.

Results

This study examines Socio-cultural determinants of nursing mothers utilization of infant welfare clinic: Roles of Health Education. It also dealt with analysis and discussion of findings. A total number of 200 questionnaire item were administered and same number were collected on the spot.

Table I: Frequency and percentage of demographic characteristics of the respondents

N = 200

Variable	Frequency	Percentage
Age (in years)		
Below 18 years	10	5.0
18 – 30 years	85	42.5
30 – 40 years	87	43.5
Above 40 years	18	9.0
Marital Status		
Married	107	53.5
Single	88	44.0
Divorced	5	2.5
Religion		
Christianity	142	71.0
Islam	53	26.5
Traditional	5	2.5
Occupation		
Farming	51	25.5
Civil servant	65	32.5
Trading	84	42.5

The demographic data of the respondents in the study revealed the following that age of the respondents in the study. The age of the respondents were distributed in the following percentage. Age below 18 years 10(5%), between 18-30 years 85(42.5%), between 30 to 40 years 87 (43.5%) between 40 years and above 18 (9.0%). However, pregnant women between the age of 30 and 40 years recorded the highest percentage of the total respondents. It also revealed that the total subjects 107 were married with 53.5%, 88 were single of 44.0% while 5 were divorce with 2.5%. Therefore married women recorded the highest percentage. The religious range of the respondents for the study were distributed in the following percentage, Christianity 53.5%, Islam 44.0% and Traditional worshippers 2.5% with these above observation, Christian women were recorded the highest percentage. It was revealed that the occupation of the respondents for the

study were farming 25.5%, civil servant 32.5% and trading (42.5%). However, the trading recorded the highest of the total respondents.

Testing the null hypotheses

Ho_1: Poverty/low economic status will not significantly influence nursing mother's utilization of infant welfare clinic in Iwo local government area, Osun State.

Table 1: Chi-square showing influence of poverty on infant welfare clinic utilization

Response	Frequency	%	Df	X^2 cal	Sigf.
SD	19	9.5	12	68.510	.000
D	33	16.5			
A	90	45			
SA	58	29			
Total	200	100			

The above table revealed that poverty significantly influence nursing mother's utilization of infant welfare clinic in Iwo local government with chi-square value of 68.510, df = 12, and level of significance set at 0.05, this gives the basis for rejecting the hypotheses that state that poverty/low economic status will not significantly influence nursing mothers utilization on infant welfare clinic in Iwo local government area, Osun State.

Ho_2: Proximity to the clinic will not significantly influence nursing mother's utilization of infant welfare clinic in Iwo local government area, Osun State.

Table 2: Chi-square showing influence of proximity to the clinic on infant welfare clinic utilization

Response	Frequency	%	Df	X^2 cal	Sigf.
SD	10	5	11	134.440	.000
D	08	4			
A	70	35			
SA	112	56			
Total	200	100			

The above table revealed that proximity to the clinic significantly influence nursing mother's utilization of infant welfare clinic in Iwo local government with chi-square value of 134.440, df = 11, and level of significance set at 0.05, this gives the basis for rejecting the hypotheses that stated that proximity to the clinic will not significantly influence nursing mothers utilization on infant welfare clinic in Iwo local government area, Osun State.

Ho_3: Marital Status will not significantly influence nursing mother's utilization of infant welfare clinic in Iwo local government area, Osun State.

Table 3: Chi-square showing influence of marital status on infant welfare clinic utilization

Response	Frequency	%	Df	X^2 cal	Sigf.
	20	10	11	87.640	.000
D	37	18.5			
A	78	39			
SA	65	32.5			
Total	200	100			

The above table revealed that marital status significantly influence nursing mother's utilization of infant welfare clinic in Iwo local government with chi-square value of 87.640, df = 11, and level of significance set at 0.05, this gives the basis for rejecting the hypotheses that stated that marital status will not significantly influence nursing mothers utilization on infant welfare clinic in Iwo Local government area, Osun State.

Ho_4: Cultural belief will not significantly influence nursing mother's utilization of infant welfare clinic in Iwo local government area, Osun State.

Table 4: Chi-square showing influence of cultural belief on infant welfare clinic utilization

Response	Frequency	%	Df	X^2 cal	Sigf.
SD	32	10	10	116.360	.000
D	39	18.5			
A	60	39			
SA	69	32.5			
Total	200	100			

The above table revealed that cultural belief significantly influence nursing mother's utilization of infant welfare clinic in Iwo local government with chi-square value of 116.360, df = 10, and level of significance set at 0.05, this gives the basis for rejecting the hypotheses that stated that cultural belief will not significantly influence nursing mothers utilization on infant welfare clinic in Iwo local government area, Osun State.

Discussion of findings

The result showed that all the hypotheses have significant influence on nursing mother's utilization of infant welfare clinic. The findings on poverty/low economic status is in line with the submission of Odunlami (2000) that women with low economic status often see infant welfare services as expensive, therefore opting for self medication. Also Olaogun (2013) reported poor economic status of nursing mother prevents them from utilizing health facility considering the

financial implication of seeking health care services.

Findings on proximity to the clinic and infant welfare clinic utilization is line with the submission of Ibrahim G.J. (2009) who reported that distance in location of the health facilities are reasons for non utilization of infant welfare services because the stress of transport to where some of these health facilities are located. Also the study is in line with the findings of Ogunjuyigbe and Liasu (2010) that proximity has implication for access to health facilities and treatment seeking behaviour.

Findings on marital status and infant welfare clinic utilization is corroborated with the Odunlami (2000) who reported that most nursing mothers especially in homes where husband is seen as lord usually don't have power to take decision on her own when it comes to infant welfare service. He further reported that nursing mothers from broken home usually pay less attention to their child health. The finding is also in agreement with Adesokan (2010) submission that marital status is a contributory factor to infant welfare services utilization.

Findings on cultural belief and infant welfare clinic utilization is corroborated by the submission of Akinwusi (2004) that cultural belief contribute significantly to utilization of infant welfare, it was also supported by the report of WHO (2005) that there are cultural practices like belief in traditional medicine and local birth attendant are contributory factors to nursing mothers utilization of infant welfare.

Summary of findings

Based on the result of the study, the following were revealed:

- Poverty/low economic status significantly influenced nursing mother's utilization of infant welfare clinic services in Iwo local government area, Osun State.
- Proximity to the clinic significantly influenced nursing mother's utilization of infant welfare clinic services in Iwo local government area, Osun State.
- Marital status significantly influenced nursing mother's utilization of infant welfare clinic services in Iwo local government area, Osun State.
- Cultural belief significantly influenced nursing mother's utilization of infant welfare clinic services in Iwo local government area, Osun State.

Conclusion

It can be concluded from this study that efforts to stem infant mortality among nursing mothers therefore could yield positive results if the socio-cultural determinants of nursing mothers utilization of infant welfare clinic are addressed by all concerned stakeholders.

Recommendations

Based on the findings of this study, the following recommendations were made:

1. Health care facilities need to be provided in rural communities of Osun State, so as to meet the objectives of primary health care which are accessible, available and affordable for rural women to address the problem of proximity and poverty.
2. There is need for health education awareness programme by government and non-government organization to change orientation on common cultural practices of female

genital mutilation, reproductive problems, early marriage and food restriction for women during pregnancy and labour.

3. There is need for women empowerment through gainful employment opportunities and other negative health seeking behaviours in rural areas of Osun state.
4. There is need for empowerment of health educator or change agent so as to sensitize against harmful cultural practices in rural areas.
5. The government at state and local government levels should improve existing health care facilities in the rural areas with implementation of safe motherhood to avert maternal morbidity and mortality.
6. National Health Insurance scheme for pregnant mothers and children should be extended to rural areas of Osun state.

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