

My baby is fine no need for more clinic visits” Facilitators and barriers for utilization of follow-up services for children born preterm in low-resource setting: parents’ perceptions.

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Background

Prematurity and its related complications are the leading cause of morbidity and mortality in children under-five. Improved neonatal care has shown better outcomes even for those with low gestation age. Survivors are at risk of long-term health problems and require follow-up after initial hospital discharge.

Objectives and Study

We sought to explore the facilitators and barriers impacting utilization of follow-up services for children born preterm as perceived by parents in a low-resource setting.

Methods

We conducted a qualitative study at Mulago Hospital, Uganda, with parents of children born preterm and aged 22-38 months at the time of the study. We collected data using five in-depth interviews and four focus group discussions. Data was analyzed using thematic analysis informed by the social ecological model.

Results

Ten subthemes emerged that could be grouped into three main themes: A) Individual: parents’ knowledge, parenting skills, perception of follow-up and infant’s condition; B) Relationship: support for the mother and information sharing; C) Institution: facility setup, cost of care, available personnel and distance from the facility. Parents of preterm infants perceived receiving timely information, better understanding of prematurity and its complications, support from spouses, availability of free services and encouragement from health workers as facilitators for utilization of follow-up services. Limited male involvement, parents’ negative perception of follow-up, stable condition of infant, health facility challenges especially congestion at the hospital, distance and care costs were key barriers.

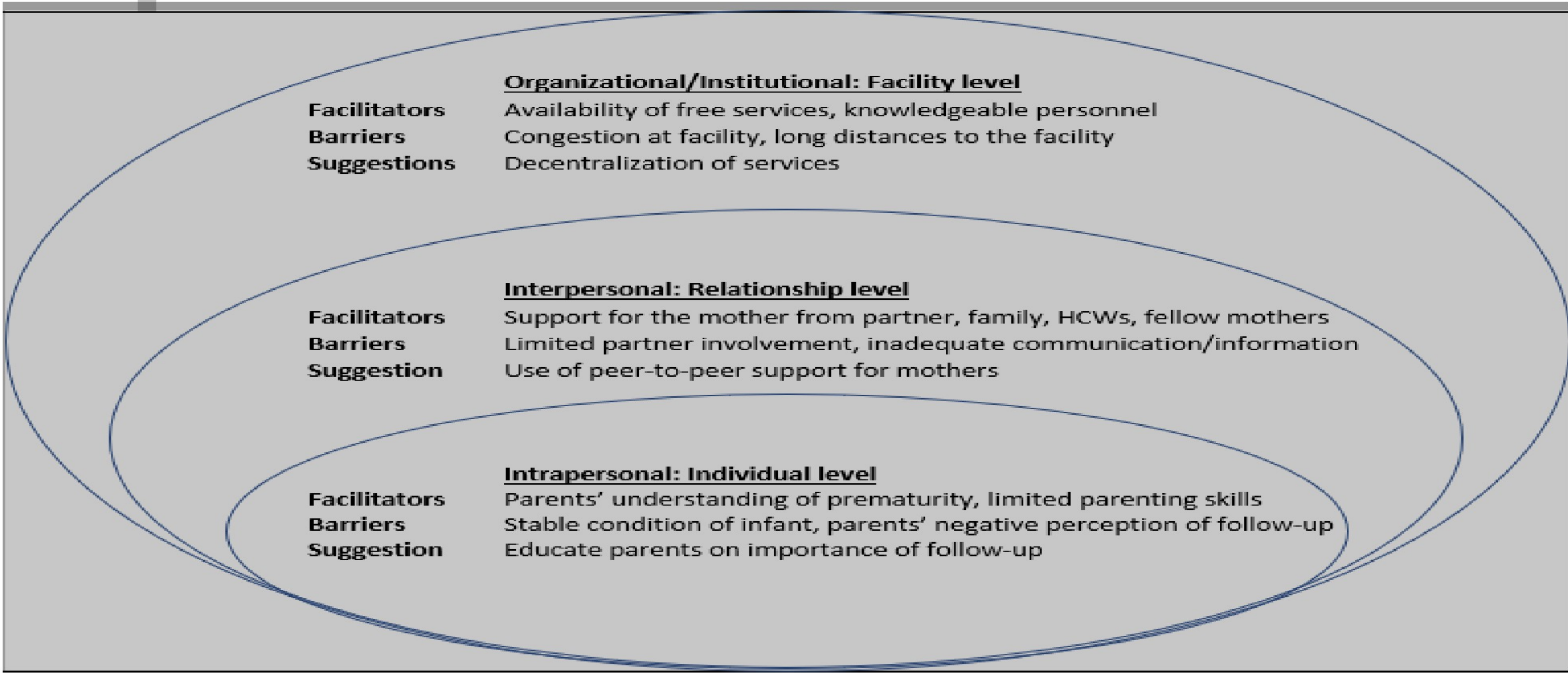


Figure 1: Facilitators and barriers affecting utilization of follow-up services for preterm infants

Conclusions

An interplay of facilitators and barriers at individual, interpersonal and health system levels encourage or deter parents from taking their preterm children for follow-up services. Improving utilization of services will require educating parents on the importance of follow-up even when children are not sick, eliciting maternal support from spouses and peers, and addressing health system gaps that make follow-up unattractive and costly.

Key words: *preterm, follow-up, facilitators, barriers*

References

1.Howson CP, Kinney MV, McDougall L, et al. Born too soon: preterm birth matters. **Reprod Health** 2013;10(1):1-9.
2. Ho LY. Follow-up care and outcome evaluation of high-risk preterm infants: a life-course commitment. **Ann Acad Med Singapore** 2018;47(2):51-5.
3. Doyle WL, Anderson JP, Battin M, et al. Long term follow up of high risk children: who,why and how? . **BMC Pediatr** 2014;14(1):1-15.
4.Abdallah Y, Namiiro F, Nankunda J, et al. Mortality among very low birth weight infants after hospital discharge in a low resource setting. **BMC Pediatr** 2018;18(1):1-6.

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