





Promoting Hospital-Based Childbirth and Maternal Health among the Maasai Community in Kajiado County

County:	Kajiado County						
Sector/s:	Health	Sub-sector/Theme:	Maternal Health				
Keywords: (for search	Improved Manya	l Itta					
in the online platform)	Maternal Shelter						
	Traditional birth attendance						
	Birth Companions						
Target Audience:	Women of reproductive age						
	Traditional Birth Attendance						
	Counties						
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included as well)							
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Introduction

Kajiado County, situated in the former Rift Valley province, spans an area of 21,292.7 square kilometers. As of the 2019 census, the County is inhabited by a population of 1,117,840 residents, with the majority belonging to the Maasai community. Kajiado County shares its borders with Nairobi, Makueni, Narok, Nakuru, Kiambu, Machakos, Taita Taveta, and Arusha (Tanzania).







The Maasai, who are Plain Nilotes and traditionally nomadic, are renowned for their pastoral way of life and unique cultural practices that incorporate indigenous knowledge to address everyday challenges. Their preference for traditional herbal remedies and characteristic cow-dug huts, known as manyattas, reflect their distinct lifestyle. However, the nomadic nature of the Maasai presents challenges in establishing essential social infrastructure such as hospitals. Consequently, expectant mothers often opt for home births, which come with inherent difficulties, including the risk of disabilities, infections, health complications, and even fatalities. Traditional Birth Attendants (TBAs) are prominent in promoting home deliveries in Kajiado.

To address this challenge, the Department of Health has formulated innovative and distinctive approaches to promote hospital deliveries within the County. These initiatives involve the transformation of TBAs into advocates for hospital births, alongside the construction of manyatta maternal shelters within hospital premises to encourage expectant mothers to opt for hospital deliveries.



Hospital Mayatta shelter







Implementation of the practice:

Engaging traditional birth attendants for home deliveries is common in various African settings. However, with the advent of modernization and the emergence of new diseases and infections, this practice has become less recommended. Many women are now afflicted by Non-Communicable Diseases (NCDs), including different forms of cancer, hypertension and heart conditions.

To address these challenges, in February 2023 the Kajiado County Government initiated a series of training workshops for TBAs, emphasizing the importance of hospital-based childbirth to reduce complications and the risk of maternal or infant mortality. Subsequently, from February to May the County constructed eco-manyattas within hospital compounds to accommodate Maasai women who prefer giving birth in a manyatta setting.

The County maintains a database of experienced TBA who are well-recognized within their communities. Further, it provides an incentive of Ksh 500 for each hospital referral made by these TBAs to expectant mothers.

To ensure the long-term viability of this program, the County has incorporated it into the County Integrated Development Plan. This strategic move allows for the ongoing construction of additional facilities in various regions to further expand the initiative's reach.







Results of the practice:

There has been an increase in the number of hospital deliveries due to the joint strategy of embracing the TBAs and the eco-manyattas in the County as shown in the table below a comparison from April to June 2023

Table 1.

	Bissi										
	ı										
	Heal	Ngatat									
	th	aek	Enkorika	Meto	Mashuru	Simba	Mosiro		Imbirikani		
Mont	Cent	Health	Health	Dispensar	Health	Health	Dispensary	Torosei	Sub County		
h	re	Centre	Centre	у	Centre	Centre	(Kajiado West)	Dispensary	Hospital	Risa	Total
April											
2023	36	11	6	o	25	o	17	5	11	o	111
May											
2023	59	18	7	3	24	3	12	3	16	3	148
June											
2023	43	24	8	7	44	o	11	4	19	6	166







Lessons learnt:

- Trained TBAs have the capacity to disseminate knowledge of beneficial maternal practices to the community and have the potential to influence the uptake of primary health care services during pregnancy and after delivery.
- As TBAs are re-oriented to become birth companions, their complementary capacity for nutrition advocacy should also be strengthened to maximize the opportunity provided through their close associations with mothers.
- Effectively linking re-oriented TBAs with skilled birth attendants in existing health system through community-based collaborative models has the potential to increase the number of women accessing skilled care and thus increase facility-based deliveries

Conclusion

The collaboration between the County Government and trained TBAs has played a crucial role in encouraging expectant women to consider giving birth in eco-manyatta facilities within hospitals. By providing financial incentives to TBAs for referrals and facilitating their presence during hospital visits, this initiative has not only made childbirth safer for mothers but has also fostered trust in the medical professionals responsible for their care. This partnership stands as a testament to the positive impact that community engagement and support can have on improving maternal healthcare outcomes in the region. It underscores the importance of innovative approaches in addressing healthcare challenges and ensuring the well-being of expectant mothers and their babies.

Further reading:

https://apps.who.int/iris/bitstream/handle/10665/258810/WHF-1983-4-n4-p291-312-eng.pdf?sequence=1&isAllowed=y

https://apps.who.int/iris/bitstream/handle/10665/37197/WHO_OFFSET_44.pdf;sequence=1 file:///C:/Users/hp/Desktop/Work/National-Reproductive-Health-Policy-2007-Kenya.pdf







Photos



