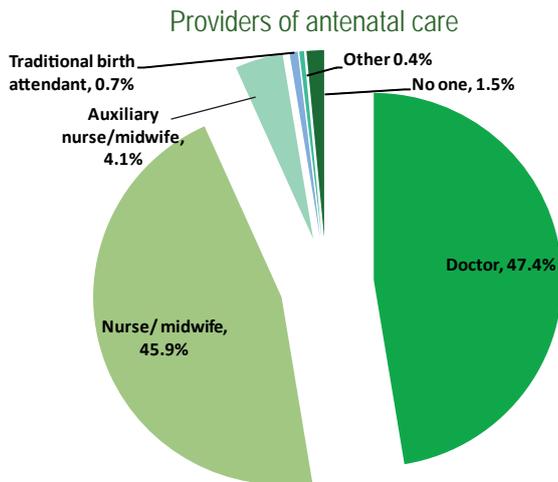




Providing adequate care during pregnancy and childbirth is important for the health of mother and baby. Reproductive health covers antenatal, childbirth and postnatal care, in addition to general access to healthcare services. Gathering this information will help identify problems with the level of care provided and groups of the population whose health needs are underserved throughout pregnancy and childbirth.

Antenatal care

Almost all women in Tuvalu (97%) received care from a skilled provider during their last pregnancy. Most commonly, care was provided by a doctor, nurse or midwife.

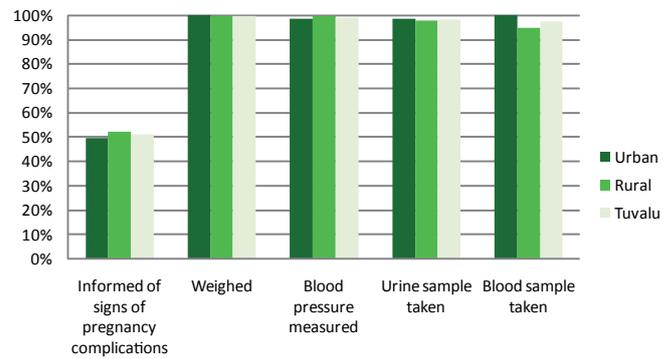


Although many women received care from a skilled professional, only 2 out of 3 women reported having the recommended four or more antenatal visits, the minimum number of visits recommended by the World Health Organization. A further 21%, 16% on Funafuti and 27% on the outer islands, could not recall the number of antenatal visits they had. The survey results show that most women have their first antenatal visit at around 5 months pregnant. By this stage in the pregnancy, the opportunity to diagnose and treat problems early will have been missed for many Tuvaluan women.

Quality of antenatal care

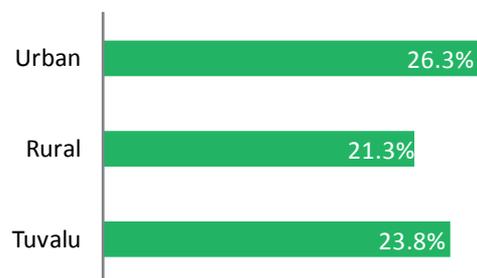
Most women reported receiving all routine care during their antenatal visits, however, only around 50% of women reported being informed of signs of pregnancy complications and a very low number of women (3.7%) reported taking intestinal parasite drugs. Although the coverage of antenatal visits is reasonably high, the survey results highlight some areas of the antenatal care system that could be improved, in particular to encourage women to begin their antenatal visits earlier in their pregnancy and to include education about the signs of pregnancy complications in routine visits.

Selected services received by women who attended antenatal care for their most recent birth (women 15-49 who had a live birth in the 5 years preceding survey)



Tetanus toxoid (TT) immunisation is given to pregnant women to prevent neonatal tetanus – a leading cause of neonatal death in developing countries. For full protection, a pregnant woman needs two doses of TT during pregnancy. If a woman was immunised before her pregnancy, she may require one or no TT injections depending on the timing of the last injection.

Tetanus toxoid immunisations



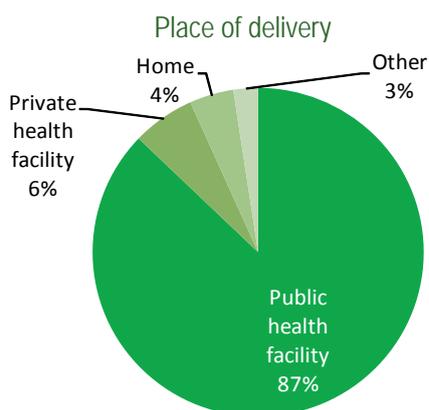
The survey results show that close to 24% of women had two or more injections during their last pregnancy and 32% of women reported that their last pregnancy was protected against neonatal tetanus due to previous immunisations.

Childbirth care

Most women gave birth in a health facility (93%) and only 4% of births took place at home. Around twice the number of births took place at home on the outer islands (6%) compared with Funafuti (3%).

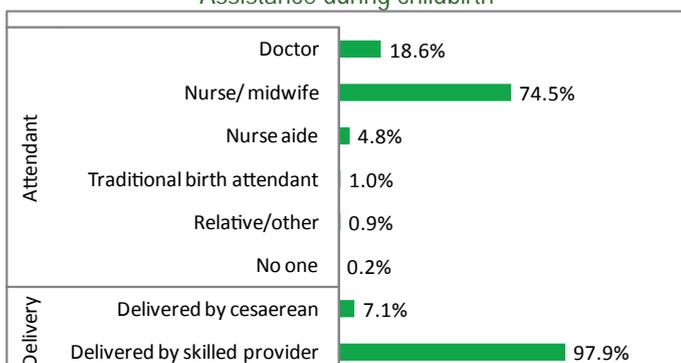
Eightyseven per cent of women reported giving birth in a public facility and, as Tuvalu has only one public hospital and eight small health centres, women who reported having given birth in a private facility would have done so overseas.





Almost all births were attended by a skilled provider and the likelihood of having a skilled attendant present at a birth was much the same for all women, regardless of their wealth, educational level and place of residence.

Assistance during childbirth



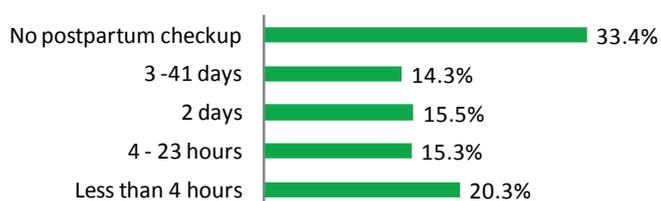
Postpartum care

Postpartum care is important to follow up on any complications following the delivery as well as to give the mother important information on caring for herself and her child. In Tuvalu, the national guidelines provide for:

- a postpartum check up within the first hour of birth,
- daily checks while in hospital, and
- a postnatal check 42 days or six weeks after delivery.

Although the vast majority of women gave birth in a health facility, around one in three women reported that they did not receive any postpartum check up. Only 20% of women reported receiving a check up within four hours of delivery. The likelihood of a woman having postpartum check ups increased according to wealth, education, age and residence in the urban area.

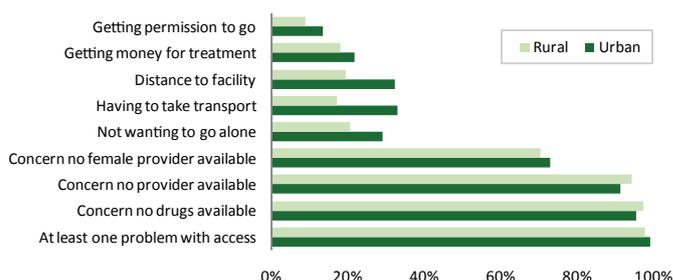
Timing of first postpartum check-up



General problems accessing health care

Most women reported at least one problem accessing health care. Most commonly, concerns around a lack of providers and the availability of drugs were the reasons given by women for not seeking health care. More women in Funafuti (32.3%) than in the outer islands (19.4%) reported that the distance to a health facility made accessing health care difficult.

General problems accessing health care



Policy note:

The DHS results portray a mixed picture regarding reproductive health in Tuvalu, but point to very specific areas that with some concerted policy attention would yield almost immediate and tangible positive outcomes.

While most Tuvalu women (67%) have the recommended four or more prenatal visits (with a further 20% not able to remember the exact number), a major concern is the late start of these visits, with a median of 5.2 months. This is too late a stage in pregnancy for proper early diagnostic and treatment opportunities for mother and child, and hence much earlier visits ought to be encouraged.

The vast majority of women (>95) reported to have had access to the standard prenatal services, however areas of concern include the fact that only about half of the women surveyed were informed of the signs pregnancy complications, and only one in four reported to have had the full course (2 doses) of tetanus toxoid immunization.

While most births (93%) were attended by a birth attendant, either by a midwife/nurse (74.5%) or a doctor (18.6%), one in three women reported not having received a post-partum check up at all. Considering that 87% of all births took place in a public hospital or health facility, and a further 6% in a private health facility, this is a surprising outcome. Delays of some hours can occur, but not with an incidence of less than one birth per day. This is an important reproductive health practice and management issue which would be easy to rectify and should to be addressed very quickly.

*For more information on reproductive health see chapter 9 in the Tuvalu DHS report

