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Women's perception of the effectiveness of Maternity waiting home usage in alleviating the three delays at Morgenster Mission Hospital, Masvingo Province

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Abstract

Maternal health is reflective of the status of the overall health system. It is therefore crucial to address the mitigating barriers between pregnant women and obstetric care holistically. The identified delays include decision to seek care, arriving at a health facility and receiving adequate skilled care. This study examines the impact of maternity waiting homes on mitigation of the three delays. Maternity waiting homes are built near a maternity hospital for rural women to inhabit 3 weeks before delivery in order to bridge the geographical gap between them and timely obstetric care mostly in resource constrained countries. Snowballing purposive sampling technique by use of Cohen tables was used to collect a sample of 115 respondents of ages of 15 to 36 years. Study site was Morgenster Mission Hospital. Triangulation of quantitative and qualitative designs entailing a descriptive survey component, focus group discussions and desk reviews were used to complement the study. The results revealed a spurious health seeking behavior enmeshed in protocol, socio economic disparities preventing timely admission in maternity waiting homes while some women circumvent household chores by being admitted in order to relax, rest and socialise. Others bemoan lack of empowerment on motherhood skills. Older women admitted in Maternity waiting homes are propagating myths within the homes causing delays resulting in patients delivering en route to maternity with assistance from peers coupled with an insinuated geographical delay within the hospital complex which has emerged as administration block the proximal entrance to labour ward at night for security reasons exacerbating the delay in women arriving in an advanced stage in labour ward. The need to increase and up skill maternity staff to enable them to man the homes round the clock is strongly recommended while opening the proximal gate to prevent further obstetric complications is mandatory. Innovative ways should be sought to mask the socio economic disparities and improve the maternity waiting home strategy.