

STILLBIRTH AWARENESS INTERACTIVE RADIO CAMPAIGN

DATA ANALYSIS REPORT

OCT 2023





QUICK STATS

8

Poll Questions

2

Radio Stations

16

Talk Shows



35%

Female Respondents



65%

Male Respondents

16,338

Unique Respondents

20,994

Total Respondents

TRAC FM facilitates data collection from citizens through radio and SMS, offering organizations, researchers, and governments a direct and cost-effective way to gather insights and represent citizen views in a direct, accurate and compelling way.

For more information visit www.tracfm.org or send and email to info@tracfm.org

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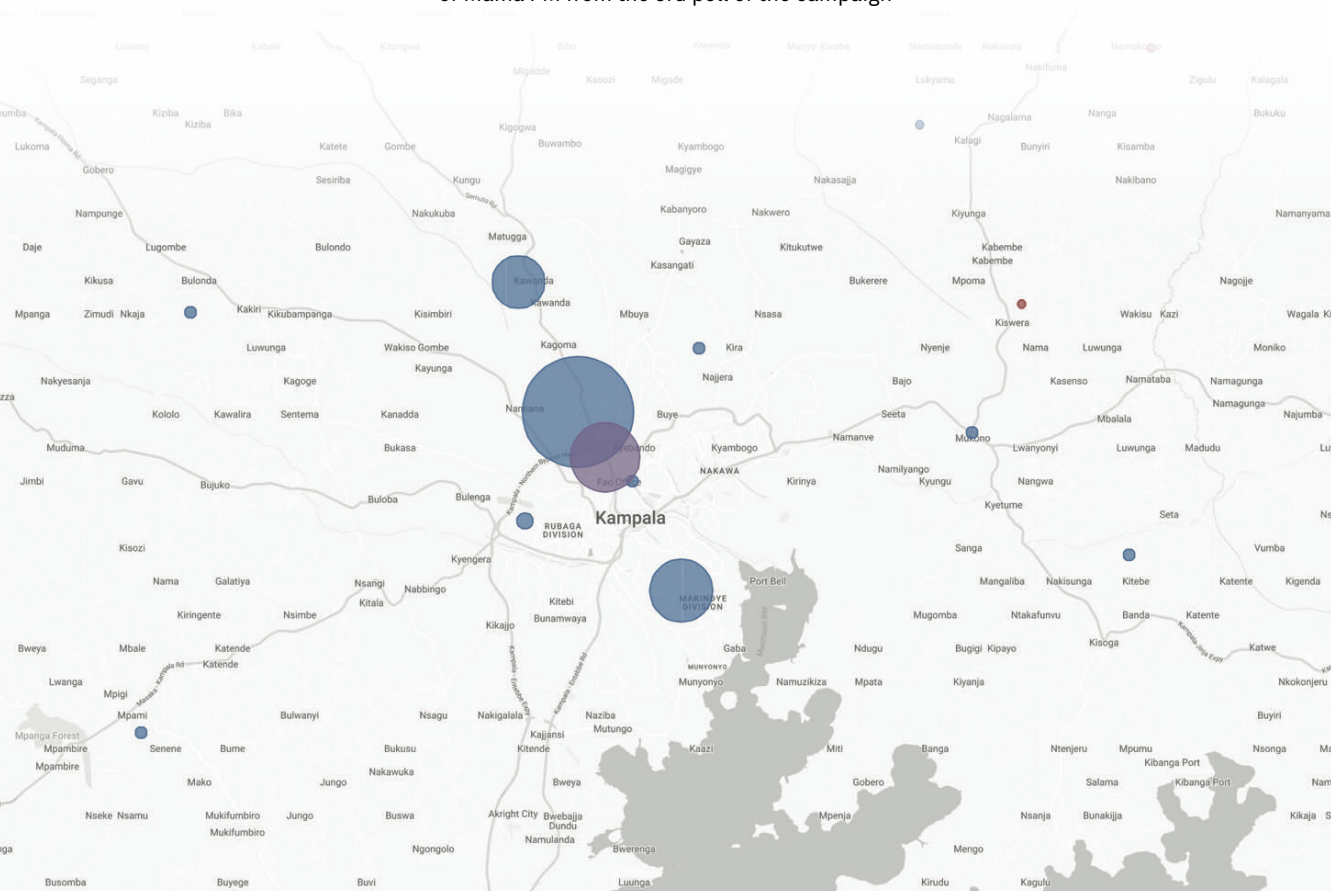
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i. List of Acronyms

ANC	Antenatal Care
Ka-TV	Ultrasound
LMICs	Low- and middle-incomes countries
TBA	Traditional Birth Attendant

POLL REACH

Map below shows the geographical reach per sub-county of Mama FM from the 3rd poll of the campaign



ii. Acknowledgments

First and foremost, we extend our gratitude to the over twenty thousand Ugandan citizens who actively participated and contributed to this report. Their engagement through responses to radio polls and surveys has provided invaluable insights into the community's viewpoints on the risks associated with stillbirth, the importance of (early) antenatal care, and the advantages and disadvantages of qualified healthcare professionals versus traditional birth attendants.

Over a span of five months, we received around 21,000 responses to eight poll questions that were broadcast on two radio stations in the Kampala region. Citizen perspectives play an important role in considering the social dimensions while conducting a technical research study like iTECH. Ultimately, the aim of this study is to benefit women and their families and drive down the number of stillbirths in Uganda, but this will be most successful if we possess a deeper understanding of how individuals make their decisions and shape their opinions.

This report was prepared by TRAC FM in close collaboration with the dedicated team members of iTECH and White Ribbon Alliance Uganda (WRA-U). The core TRAC FM team included Innocent Amanyire, Wouter Dijkstra and Maurice van Rooden. The committed iTECH team members consisted of Dr. Sam Ali, Prof. Josaphat Byamugisha, Assoc Prof. Wessel Ganzevoort, Asst Prof. Marcus Rijken, Dr. Winfred Nakato and Dr. Daniel Lukakamwa. The WRA-U team brought together Dr. Rose Mukisa-Bisoborwa, Judith Kiconco, Hassan Kanakulya and Elman Nsinda. The collective effort of this entire team proved invaluable in shaping both the poll questions and the content of this report.

This report utilized data obtained from radio polls broadcasted on Radio Simba and Mama FM for which we gratefully acknowledge their support. We extend special appreciation to our talk show guests who generously shared their knowledge and experiences, actively participating in engaging and vibrant radio debates: Dr. Winfred Nakato, Dr. Daniel Lukakamwa, Elizabeth Mutesi, Solomon Kabogoza, Mungi Steven, Basiimwa Vitoe, Nakyobe Sylvia, Sister Kihembo Christine, Evelyn Tushemereirwe, Elman Nsinda, Ben Okia, Resty Nazziwa, Shekh Nwanje Nasar, Namugga Aida, Winomujuni, Namagala Angella and Jalia Namuli.

Lastly, we would like to thank Wellcome Leap for their financial support provided through the In Utero program.

iii. Key Findings

CAUSES OF STILLBIRTH

Delayed Antenatal Care, Violence, and Poor Diets Identified as Leading Causes of Stillbirths in Recent Ugandan Poll



REASONS FOR POSTPONING EARLY ANTENATAL CARE

Men See Hidden Pregnancies, Women See Empty Pockets: Ugandan Poll Sheds Light on Gender Gap in Early Antenatal Care Challenges



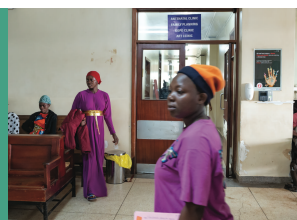
PERSPECTIVES ON ULTRASOUND

Ka-TV (Ultrasound) Dilemma: Ugandan Poll Uncovers Cost, Access, and Trust Barriers to Essential Ultrasound Scans



THE IMPORTANCE OF NUTRITIONAL SUPPLEMENTS

Diverse Dietary Paths, Yet Folic Acid Falls Behind: 2297 Respondents Shed Light on Expectant Mothers' Nutritional Choices



QUALIFIED AND TRADITIONAL BIRTH ATTENDANTS

Blending Old with New: Ugandan Radio Poll in the Central Region Signals Public's Openness to Integrating Traditional Birth Attendants in Formal Healthcare Amid Staffing Shortfalls



ENHANCEMENTS IN MATERNAL CARE

Learning for a Warm Welcome: Ugandan Poll Highlights Urgent Need for Improved Staff Attitude and Clear Communication in Maternity Care, Proposing Soft Skills Training and Community Health Worker Integration as Stepping Stones



1.0. Foreword

Social research can make a significant contribution to social change¹ in all areas including health behaviour. The issue of acceptability of novel medical diagnostics is highly dependent on a well-informed society and researchers need to pay attention to that. iTECH is a project that aims to develop and validate a tool that can predict the risk of stillbirths amongst pregnant women in Uganda, sub-Saharan Africa and the world. This tool will be based on parameters like ultrasound, maternal hemodynamics and liquid biomarkers collected amongst a cohort of pregnant women in Uganda.

However, for this tool to stand a chance of being adopted in clinical guidelines and practice thereafter, we are taking necessary steps by engaging the relevant stakeholders in the community. This is also important for acceptance by the targeted population. In our previous EPID project work, we explored the views and experiences of mothers, healthcare workers and health system managers regarding the use of doppler ultrasound in pregnancy in a rural community in Western Uganda². Safety as well as partner involvement emerged as key issues for access and acceptability of the investigations.

For the iTECH project, we also offer the local communities a chance to make their voices heard about healthcare preferences, and opinions on new medical tools such as ultrasound and any other matters related to this project. This has been championed by TRAC FM, an opinion-polling system where radio listeners or anyone in the community can give direct feedback through free SMS with a live, instant dashboard view of responses.

The well written results of this campaign show the perspectives of the local community on still births, antenatal care and the rationale for initiating in the first trimester, birth preparedness and respectful maternity care charter.

Sam Ali
PI, iTECH study



- 1** Tawodzera, M.C., L.T. Mabasa, and M. Themane, Contributions of Social Research Methodologies to Social Change: Giving Voice to the Voiceless. *International Journal of Qualitative Methods*, 2022. 21: p. 16094069211072417.
- 2** Ali, S., et al., Antenatal Doppler ultrasound implementation in a rural sub-Saharan African setting: exploring the perspectives of women and healthcare providers. *Reproductive Health*, 2021. 18(1): p. 199.

2.0. Background

About iTECH

According to the World Health Organization, an estimated two million stillbirths occur globally each year, significantly affecting parents and society at large.³ While high-income countries have registered significant reductions in stillbirth rates in the past two decades, the narrative is different for sub-Saharan Africa: stillbirth rates have instead increased. For example, in Uganda, there was an 8.6% increment between 2000 and 2019.⁴ The burden of stillbirth remains substantially high in low-income countries, yet there is no effective screening strategy to detect deprived fetuses at risk of stillbirth. Prognostic models to more precisely estimate a woman's individual risk of stillbirth have been proposed as a potential solution, but there is a shortage of robust, clinically applicable models in low-resource settings. The iTECH project is a research study that aims to develop and validate a prediction model for use at the point of care in low-and middle-incomes countries (LMICs) to quantify a woman's individual risk of antepartum stillbirth based on a set of easily measurable, accessible, highly predictive and cost-effective markers, and make it freely available for healthcare providers in low-resource settings.

TRAC FM's involvement in iTECH

In response to this pressing issue, TRAC FM is committed to supporting the iTech program. This partnership seeks to engage diverse communities throughout Uganda, with the objective of gathering public opinion data concerning the potential adoption, concerns, and preconceived notions associated with stillbirth and (early) antenatal care. We strengthen data sets with additional demographic data and qualitative call-centre feedback from selected participants. In doing so, TRAC FM aims to facilitate a comprehensive understanding of this critical public health concern from a social perspective, ultimately informing effective interventions, social research and policy recommendations.

³ <https://www.who.int/health-topics/stillbirth>

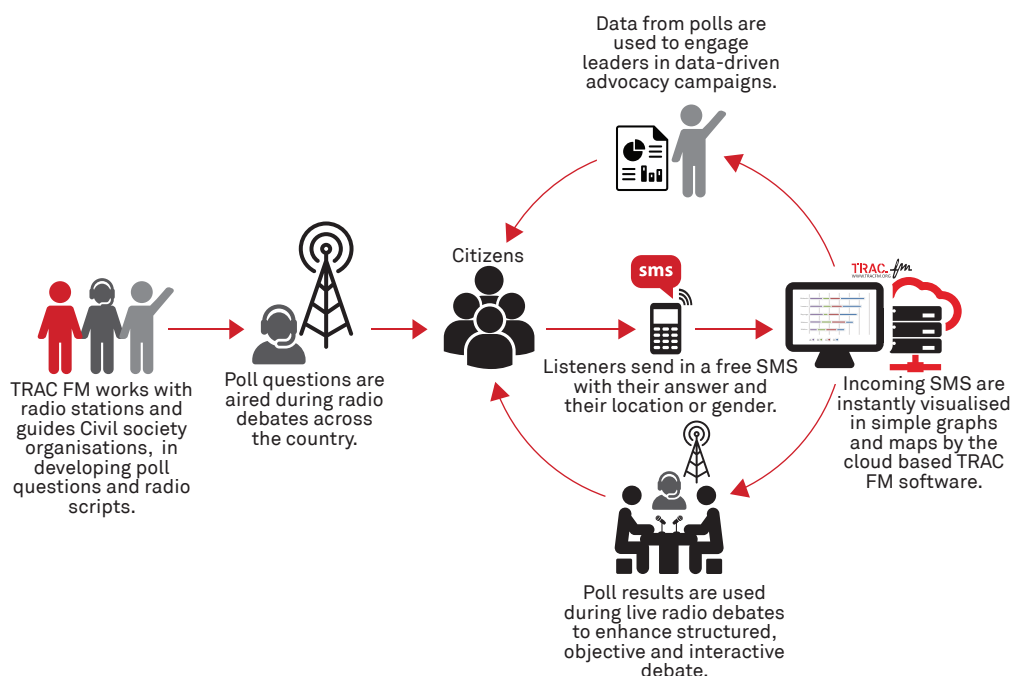
⁴ Hug L, You D, Blencowe H, Mishra A, Wang Z, Fix MJ, et al. Global, regional, and national estimates and trends in stillbirths from 2000 to 2019: a systematic assessment. *Lancet* (London, England). 2021;398(10302):772-85.

3.0. Methodology

TRAC FM aims to collect valuable data and stimulate meaningful conversations through the analysis and broadcast of citizen feedback. TRAC FM offers free participation to the polls in all local languages. Each phone number only gets one vote in the poll. By working with the the most widely favored local language radio stations at the most popular time slots, TRAC FM polls and talk shows reach the homes of millions of listeners.

During the live talk shows, The TRAC FM software visualizes the responses in real time, making it possible for the talk show host and commentators in the studio to access and discuss live poll results. For the iTECH campaign, two radio stations took part and received a total average of 2,500 responses per poll question. In the period April to September 2023, the TRAC FM platform received a total of 20,994 responses on the 8 poll questions presented in this report.

For a 2-minute information video on the TRAC FM methodology, please visit www.tracfm.org or follow this link: <https://youtu.be/HZiViHlIYOU>



4.0. Poll Findings

Understanding Stillbirth and Maternal Care in Uganda

Stillbirth is a pressing concern in Uganda. While global health organizations have identified common medical causes, beliefs in communities like Uganda also shape how pregnant women make healthcare choices. Our report examines these local views on the causes of stillbirth, combining data from TRAC FM radio polls and insights into cultural practices.

Antenatal care, key to a healthy pregnancy, stands out in our findings. Early care is like preparing the soil before planting crops, but many Ugandan women miss out on this early help due to various reasons, from practical hurdles to personal beliefs. The use of ultrasounds, or 'Ka-TV', also presents a mix of opinions. While some see them as essential, others have concerns about cost, access, or safety. Our report also looks at the varied views on nutritional supplements during pregnancy, from doctor-recommended choices to traditional ones like clay. The decision of where to give birth, whether in modern hospitals or with traditional birth attendants, also showcases the balance between old and new practices. Together with its partners, TRAC FM aims to shed light on these topics, helping improve maternal care in Uganda.



4.1. Causes of Stillbirth

Uganda has a high instance of stillbirths - 40,000 annually. Stillbirth is when a baby dies after 28 weeks (7 months) of pregnancy. Any death before that is called a miscarriage. When a baby dies after being born, we call this a neonatal death. There are many misconceptions about stillbirth. This program will address some of these misconceptions and give valuable information on the detection and prevention of stillbirth.

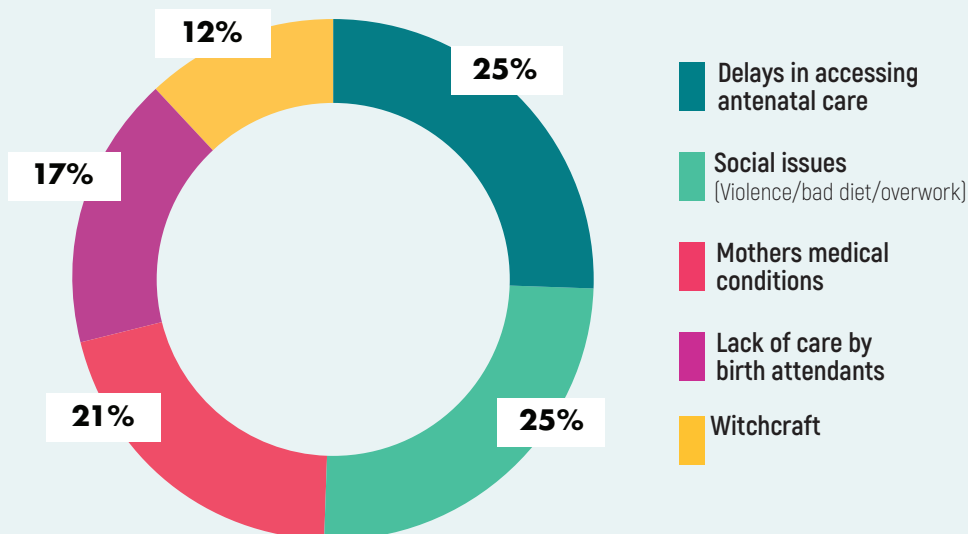


POLL ONE

What do you think is the main cause of the high rates of stillbirth in your community?

TOTAL RESPONSES: **2,020**

This poll question ran on Radio Simba and Mama FM from April 29, 2023, to May 14, 2023.





Analysis

The poll results reveal a multifaceted understanding of the factors contributing to stillbirth in Uganda. A significant 25% of respondents identified delays in accessing antenatal care as a primary reason for stillbirth, emphasizing the crucial role of timely medical intervention during pregnancy. Equally notable, another 25% attributed stillbirth to social issues, highlighting the potential negative impacts of societal stressors, such as violence, poor diet, and overwork, on maternal and fetal health. Surprisingly, while a substantial 21% believe that the mother's medical conditions play a pivotal role, 12% still perceive witchcraft as a primary cause, shedding light on persistent cultural beliefs influencing health perceptions.

For healthcare professionals, these findings suggest a dual approach to address the challenge. First, there is an evident need for expanding and emphasizing the accessibility and importance of antenatal care. This can be achieved through community awareness campaigns and optimizing healthcare infrastructure. Second, given the weight of societal and cultural beliefs, healthcare initiatives should integrate community education to dispel myths surrounding stillbirth and foster a deeper understanding of tangible medical and societal factors. Collaboration with community leaders can aid in reshaping perceptions and ensuring that pregnant women receive the comprehensive care they need.



"I think the main cause of stillbirth is because of the complications we have as women in our stomachs that we pay no attention to, we delay going to hospitals and sometimes it is too late to save the baby. I personally lost my grandchild because my daughter had high blood pressure and when we went to the hospital it was too late so we lost the baby. The other reason would be irresponsible husbands who we complain to about our health complications and refuse to give us money to go to the hospital also leads to stillbirths"

- Nakakawa Habiba

4.2. Reasons for postponing early antenatal care

Antenatal care, which we sometimes also call 'pregnancy care', is the support and advice given to a woman when she's pregnant. Think of it like preparing a field for planting - you remove the stones, make sure the soil is good, and give it water so that the crop can grow well. Early antenatal care is like that - it helps to make sure the baby grows well and the mother stays healthy.

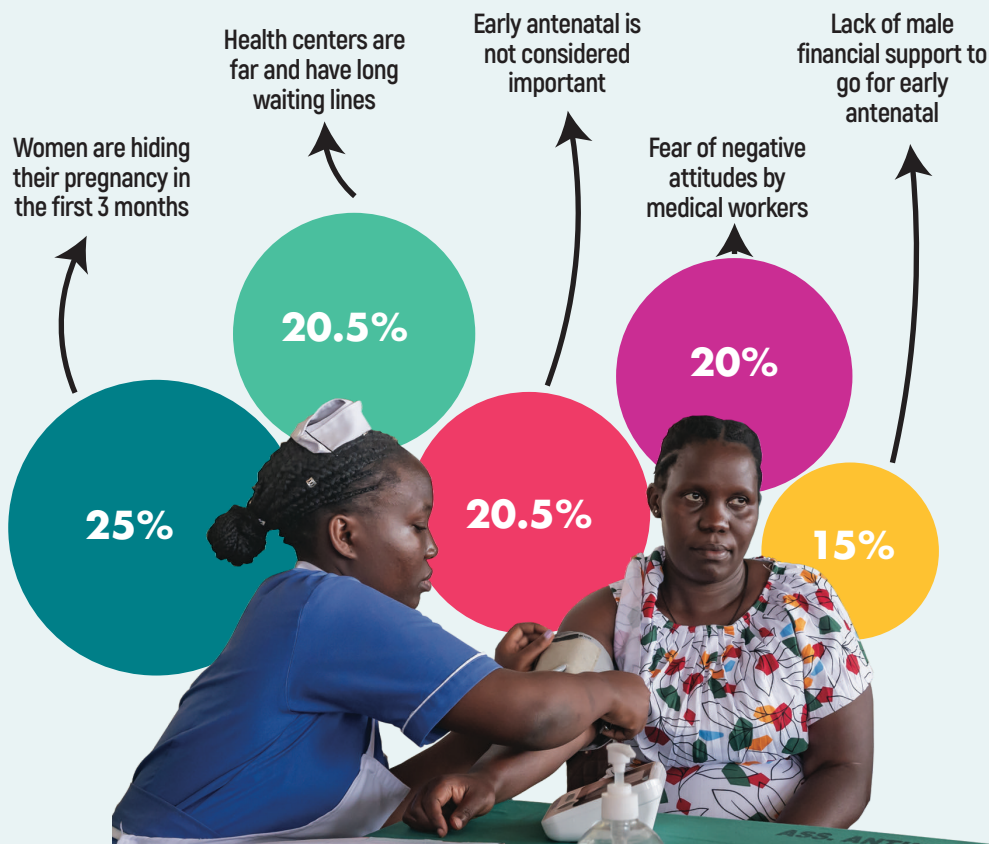
It's important to start this care as soon as you know you're pregnant, which is why we call it 'early' antenatal care. Many pregnant mothers in Uganda fail to go for 'early' antenatal care within the first 12 weeks of pregnancy.

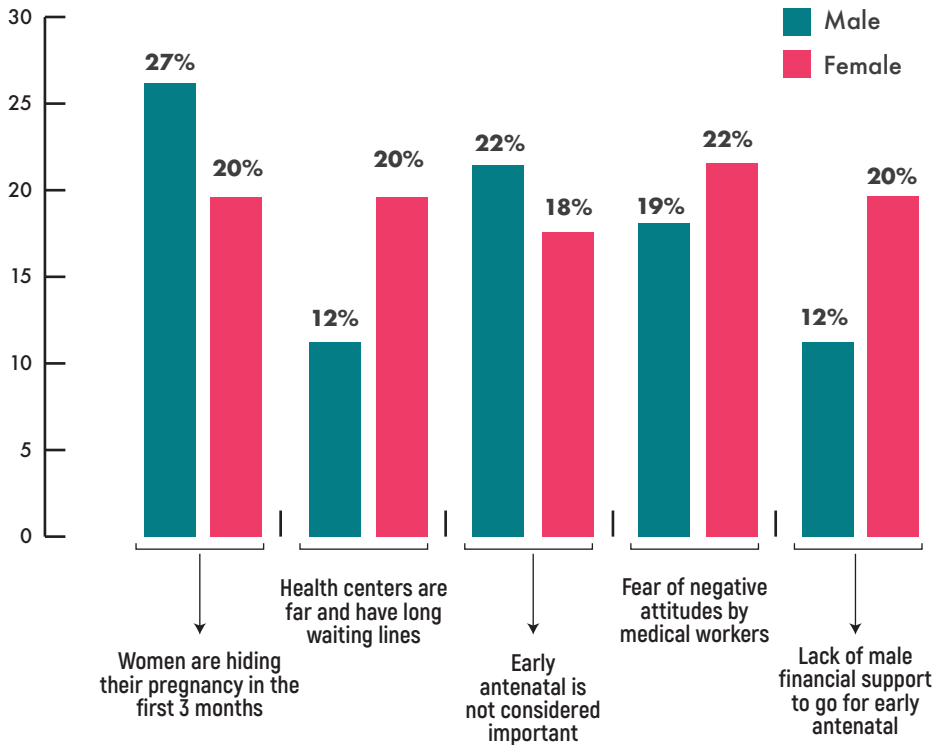
POLL TWO

What is the main reason pregnant women do not go for early antenatal care?

TOTAL RESPONSES: **3,241**

This poll question ran on Radio Simba and Mama FM from June 14, 2023, to June 27, 2023.





Analysis

Upon analyzing the poll results concerning reasons pregnant women do not opt for early antenatal care, several key insights can be deduced, especially when focusing on the differences in perceptions between male and female respondents:

Different gender perceptions on Financial Support:

Overall: 15% of respondents identify a lack of male financial support as a significant reason.

Gender Analysis: There's a notable gender difference here. 12% of male respondents see this as a barrier, whereas the percentage rises to 20% for female respondents. This indicates that women are more likely to perceive financial support from their male partners as crucial in the decision to go for early antenatal care.

Concealing Pregnancy:

Overall: 25% of respondents believe women are more inclined to hide their pregnancies in the initial three months, making it the most cited reason in the poll.

Gender Analysis: 27% of males compared to 20% of females believe this. This disparity indicates that men are more likely to think that women are concealing their pregnancies, which might hint at certain societal or cultural dynamics.

Gender Differences:

From the given data, there's a clear variance in perception between men and women on certain issues. The differences in the perceptions of financial support and the concealment of pregnancies are particularly noteworthy, suggesting that gendered experiences and societal roles significantly influence opinions on these matters.

In conclusion, both genders recognize multiple barriers to early antenatal care, but their emphasis on these barriers varies. The insights derived can be instrumental in tailoring interventions and awareness campaigns that are sensitive to the gender-specific needs and concerns in the realm of early antenatal care.



"I'm about 4 months pregnant and I've never gone for antenatal because my husband has never provided finances but keeps on promising to facilitate me. I'm not so sure whether the problem is with the economy, but I hope to go as soon as possible."

- Nakanjako Grace (Kawempe Lugoba, Kampala District)



4.3. Perspectives on ultrasound

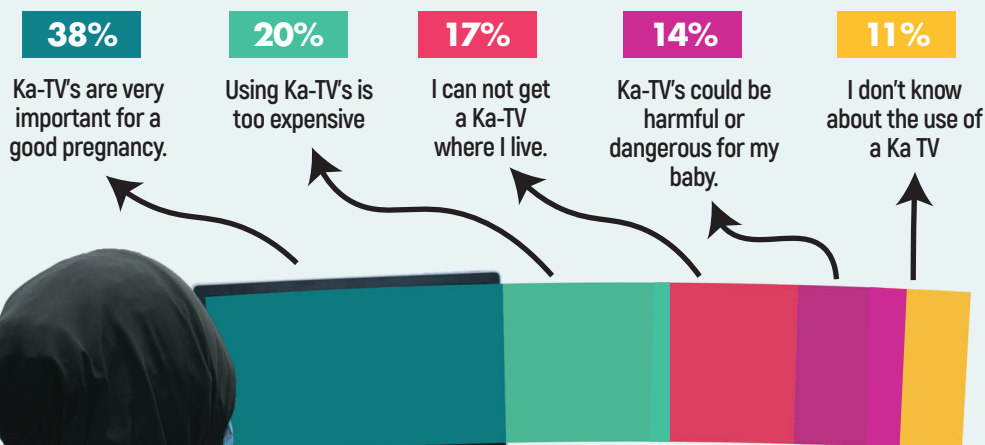
Ultrasounds, or 'Ka-TV,' let doctors see the baby growing inside the mother with a special camera. This way, the doctor can see how the baby is doing and the mother can see her baby before it's born. Some people have different ideas about these 'baby TVs'.

POLL THREE

What is the main reason pregnant women do not go for early antenatal care?

TOTAL RESPONSES: **2,792**

This poll question ran on Radio Simba and Mama FM from June 14, 2023, to June 27, 2023.



Analysis

The results from the poll indicate a complex landscape of perceptions around the use of ultrasounds, or 'Ka-TV', in Uganda. While a significant 38% of respondents recognize the importance of ultrasounds for a successful pregnancy, the collective concerns from the remaining respondents - which include expense, lack of accessibility, potential harm to the baby, or simply a lack of knowledge - underscore barriers and misconceptions that are prevalent in the community.

When we compare these findings to western countries, the perception and usage of ultrasounds differ markedly. In Europe, ultrasounds have become a routine part of prenatal care, with most expectant mothers undergoing multiple scans throughout their pregnancy. The general perception in Europe is largely positive, with ultrasounds being seen as essential for monitoring the health and development of the unborn child. Financial barriers are less of an issue in many European countries due to healthcare subsidies or national health services. Furthermore, the infrastructure and medical facilities in Europe are generally more advanced and widespread, making access to ultrasound technology more readily available. Misconceptions or concerns about the safety of ultrasounds are also less common, likely due to more widespread education and awareness campaigns.

Returning to Uganda, the combined group not part of the 38% presents a myriad of challenges that need addressing. They constitute a majority, with concerns ranging from cost, accessibility, and potential harm to a simple lack of awareness. These insights highlight an urgent need for targeted interventions, perhaps in the form of public awareness campaigns, subsidies, or mobile health units to cater to remote areas. Addressing these concerns can help bridge the knowledge and accessibility gap and align perceptions more closely with the medical consensus on the benefits of ultrasounds.





"I personally don't like the ultrasound scan, some of us were given wrong results by the scan. I have five children but three of them were wrongly identified by the scan. I was told I was going to give birth to a baby girl but on the day of delivery I gave birth to a boy. My husband was confused and even thought that I was given the wrong child. My relatives and friends were happy for me when I told them that I was expecting a girl but were equally disappointed because all the children's clothes and gifts I had bought and received were for a girl. I don't think I will ever go for an ultrasound scan again."

- Mbabazi Resty



"I have heard about the scan and I would also wish to go for the scan since I am pregnant but I can't because the medical centres near us don't have that facility yet in the Health centres where we could find them they are very expensive."

- Namuleme Janet (Kapeeka)

4.4. The importance of nutritional supplements

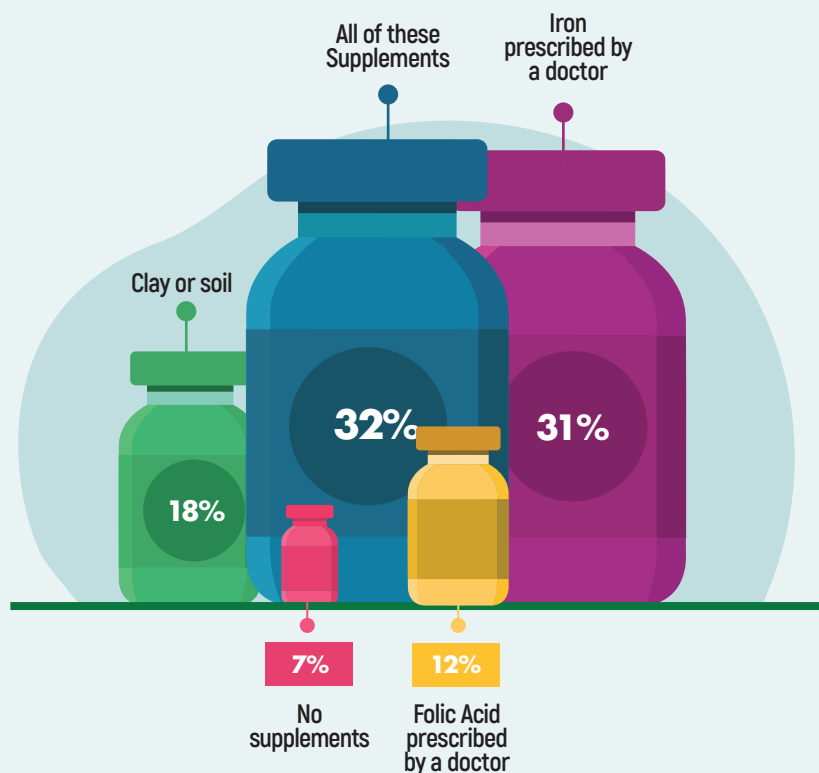
We would like to understand how mothers-to-be in our community are eating and what extra nutrients they're taking to help their babies grow strong and healthy. The food and extra nutrients or 'supplements' a pregnant woman consumes are like the building blocks for the baby's development. Adequate nutrition during pregnancy can reduce the risk of birth complications and ensure the healthy growth of the baby.

POLL FOUR

What kind of nutritional supplements do pregnant women in your household rely on?

TOTAL RESPONSES: **2,297**

This poll question ran on Radio Simba and Mama FM from July 26, 2023, to August 7, 2023.



Analysis

b. Understanding the implications and future strategies:

The data unearths some insights into the community's pregnancy-related nutritional practices to which further investigation is required. The consumption of clay or soil, known as geophagy, can sometimes be practiced for its perceived nutritional benefits, but it may also pose health risks. The fact that a significant portion uses all suggested supplements suggests a blend of traditional and modern practices. It is also worth noting that a percentage of respondents do not use any supplements at all and that folic acid is the least mentioned of the supplements. The findings underscore the importance of continued education and outreach to pregnant women in the community, emphasizing the benefits of medically recommended supplements like iron and folic acid, while also addressing traditional practices and their implications.

c. On folic acid:

Folic acid, also known as vitamin B9, is essential for pregnant women. It not only helps prevent severe birth problems related to the baby's brain and spine but also supports the baby's overall growth by assisting in cell and DNA creation. Additionally, it's vital for the mom, aiding in producing more red blood cells, especially important when expecting.

In many African countries, including Uganda, diets often consist of staple foods that may not be naturally rich in folic acid. While some Western countries fortify staple foods like bread and cereals with folic acid, this is not always the case in African nations. Additionally, the prevalence of malaria in regions like Uganda can pose a problem. Some antimalarial drugs can interfere with folic acid absorption and metabolism, potentially leading to deficiencies.

Given these challenges, it's crucial for pregnant women in Uganda and similar contexts to be aware of the importance of folic acid and to take steps to ensure they're getting enough, either through their diet or supplements. Furthermore, due to economic constraints and lack of awareness, not all pregnant women in Uganda might have access to prenatal vitamins which include folic acid. Hence, promoting the importance of folic acid in local communities and ensuring its accessibility becomes paramount.



"In our community women use supplements like dodo (greens) and drink bushera and fruits. When we drink them, they tell us that we get iron. This is mostly what doctors tell us to take."

- Ninsiima Peace (Kalerwe)

"I am a resident of Wakiso. In my area pregnant women like taking clay as a supplement. Even when you ask them they can tell you how they crave clay."

- Namutebi Agnes



4.5. Qualified and traditional birth attendants

Traditional birth attendants (TBAs) in Uganda are individuals within communities who have traditional knowledge and skills related to pregnancy and childbirth. They are usually experienced older women who assist pregnant women during childbirth using traditional methods and practices. While TBAs can offer valuable support, official healthcare providers are often better equipped to handle complications and ensure the safety of both the mother and the baby. To better understand citizens' perspectives on the role of qualified and traditional birth attendants, we asked two different poll questions.

POLL FIVE

Where would you go to deliver your baby?

TOTAL RESPONSES: **2,903**

This poll question ran on Radio Simba and Mama FM from August 7, 2023 to August 21, 2023.

82%

To a trained health care provider (such as a hospital, health center, clinic, maternity home)

14%

To the care of a traditional birth attendant

4%

Giving birth at home, with the help of family or neighbors



Should traditional birth attendants still deliver babies despite being banned by the Ministry of Health?

TOTAL RESPONSES: **2,333**

This poll question ran on Radio Simba and Mama FM from August 22, 2023 to September 4, 2023.

36%

Yes, because hospitals and clinics don't have enough capacity

27%

No

37%

Yes, because TBAs provide more personalized care



Analysis

Based on TRAC FM poll results, even though many individuals prefer well-equipped and adequately staffed hospitals for childbirth, there is a significant acknowledgment of the importance of traditional birth attendants (TBAs) due to their accessibility and personalized care. Respondents highlighted that, when services are available in hospitals, improving the attitude of the hospital staff is crucial.

The data supports the notion that the majority of hospitals within our operational area face staffing challenges. This results in expectant mothers

experiencing long waiting times, being turned away, and receiving insufficient personal care during childbirth. Consequently, many are compelled to seek assistance from semi-qualified or unqualified birth attendants, thereby increasing the risk and occurrence of stillbirths.

One of the main reasons for the lack of qualified and experienced personnel in public hospitals is non-competitive wages compared to private sectors and international opportunities. Additionally, the demanding nature of the job, combined with insufficient resources, places an undue burden on the hospital staff. Addressing these challenges requires a multifaceted approach, including increased funding, capacity-building in training institutions, stimulating medical professionals to work in underserved areas, and improving the overall healthcare infrastructure.

Implications and future considerations:

The poll results underscore the challenge Uganda faces in its maternal healthcare framework. A sizable portion of the respondents recognize the capacity constraints of formal healthcare institutions and view TBAs as a valuable supplement. This suggests that while the ban by the Ministry of Health is aimed at ensuring the safety of mothers and babies, there might be a need to reassess how to integrate TBAs into the broader health system, possibly through training or collaborations, to combine traditional personalized care with modern medical practices.



"when my wife gets pregnant I hope to take her to clinics for starters to get antenatal care to avoid long lines in public hospitals. But when the time of giving birth comes, I will take her to a bigger hospital to deliver our child."

- Kasirye Marvin (Kisaasi)

"Let the TBAs stay in because they tolerate us most especially when we don't have money and will help you deliver your baby on credit, yet in hospitals you cannot because the doctors will want a complete payment from the counter even though the baby is due."

- Katusiime Jackline (Nabbingo, Wakiso District)

"TBAs should stay in practice because they render service to the expecting mother, since there is too much crowd in hospitals and because the TBAs are within the community and near. We reach them so easily and they help us to have a quick and safe delivery. Therefore a humble request to the government to allow them continue practicing and put them in hospitals to work hand in hand with the doctors."

- Edisa Nakiboneka (Nabweru, Kampala District)

4.6. Enhancements in maternity care

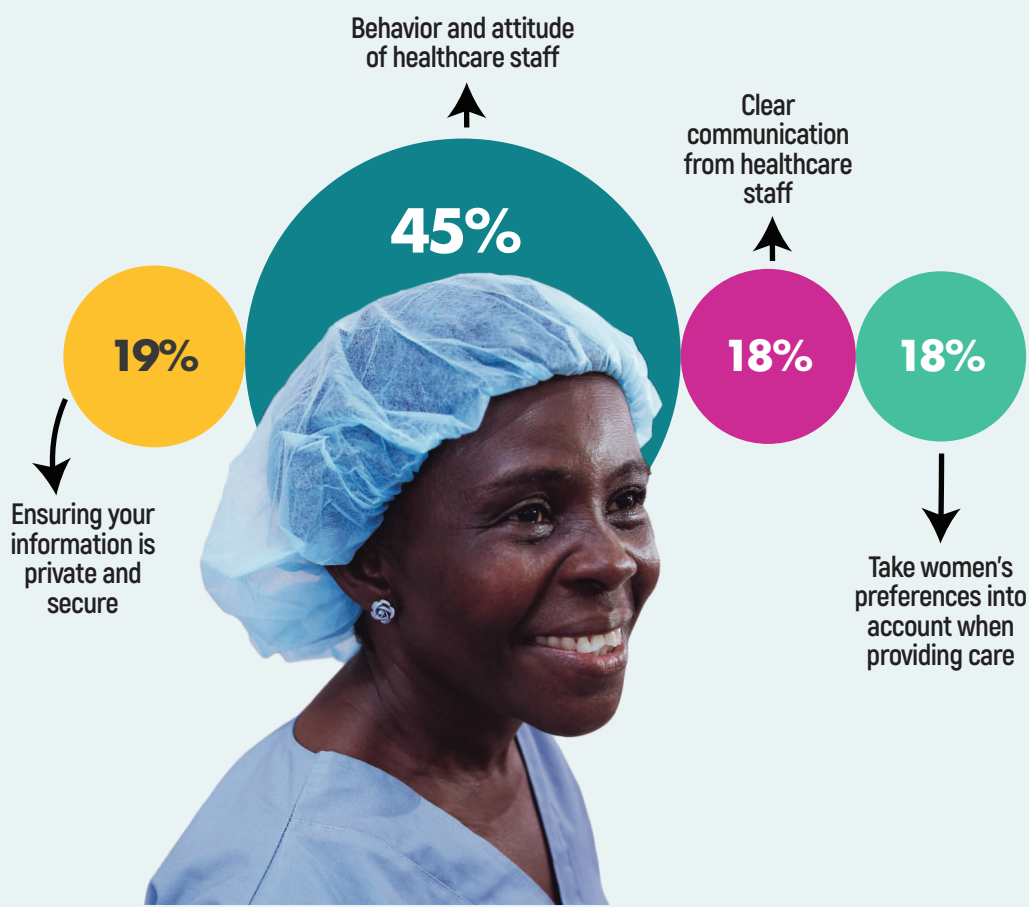
Maternity care is important for the well-being of expectant mothers and their babies. The quality of maternity care has a major impact on the mother's overall pregnancy experience and health outcomes. In the previous poll, we saw that people value personalized care. That is why we would like to know how maternity care providers can make pregnant women feel more welcome to attend a hospital or a clinic.

POLL SIX

What can maternity care providers improve in the care of pregnant women?

TOTAL RESPONSES: **2,711**

This poll question ran on Radio Simba and Mama FM from September 4, 2023 to September 18, 2023.



Analysis

a. Understanding the problem in Uganda's maternity care:

In the context of Uganda, where the healthcare system faces challenges of underfunding and a scarcity of qualified professionals, the quality of maternity care is crucial for the well-being of expectant mothers and their babies. A recent poll involving 2,711 respondents indicated areas of concern within this system. A vast majority, 45%, pointed towards the behavior and attitude of healthcare staff as their top concern. This feedback comes amidst existing obstacles like limited resources and inadequate training, which can sometimes contribute to strained patient-provider relationships.

b. Analyzing results and suggesting feasible solutions:

Given the overwhelming response about staff behavior and attitude, there's a pressing need to address this concern even amidst the broader challenges. Simple, cost-effective interventions, like basic soft skills and communication training for existing healthcare staff, could make a difference. The integration of community health workers, who often have a better understanding of local contexts and can bridge the communication gap, could also be beneficial. While Uganda grapples with infrastructural and financial constraints, prioritizing patient feedback and making small, incremental changes can pave the way for better maternity care in the region.





"In 2014 I went to the hospital to deliver my baby who was in a breech. I told the Doctors that I won't be able to deliver normally and they insisted that I would have a normal delivery and told me to return when I feel the labor pains. When I went back to the hospital I waited till midnight to see the doctor who didn't even attend to me and sent a Midwife to check on me, the midwife was shocked to see the condition I was in who told the doctor but the doctor instead just moved away talking about the party she had attended on a phone call. I only remained with the midwife and the intern nurses. When the time for delivery reached I failed to push the baby, it was already in breech position, and its feet were out so it passed on. Luckily some two good doctors came in and rescued my life. I still bear the pain in my heart because I had informed the hospital in time that I will not be able to have a normal delivery but the reluctance of the first doctor that attended to me made me lose my child."

- Aisha Birabwa (Kisaasi)

"Health attendants are very rude, they shout at pregnant women especially those in government hospitals and yet a pregnant woman comes in a condition that just needs care and to be shown love. Some of the pregnant women might even have high blood pressure which might increase and hence lose both the child and its mother because of the reckless health attendants."

- Mutuzo Vastina (Woman Councilor Kyambogo Parish)

"I suggest that health attendants in government hospitals should officially tell us the amount of money we are supposed to give them to be cared for: when you go to the hospital, they don't attend to you unless when you give them some money and yet they don't openly ask for it so they leave you stranded until you get someone to give money."

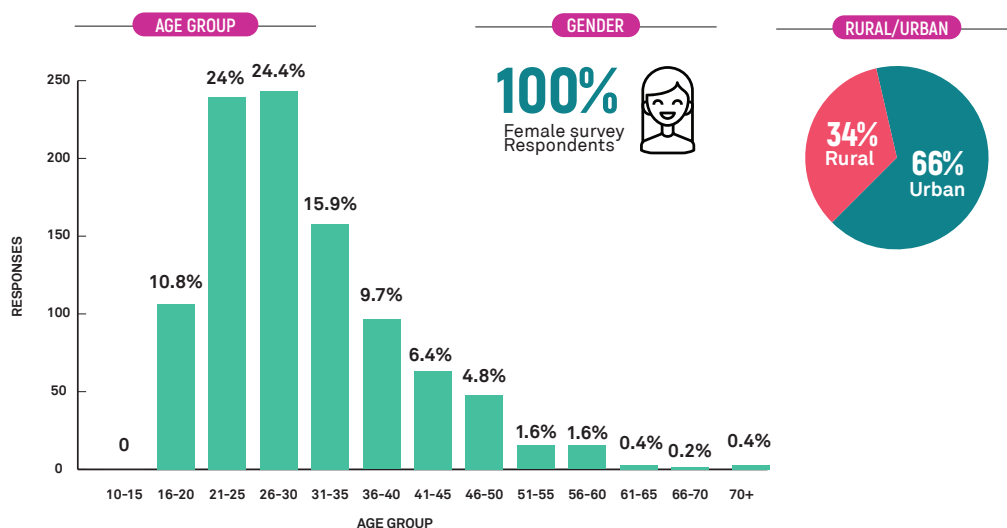
- Sempija Fahad (Kireka)

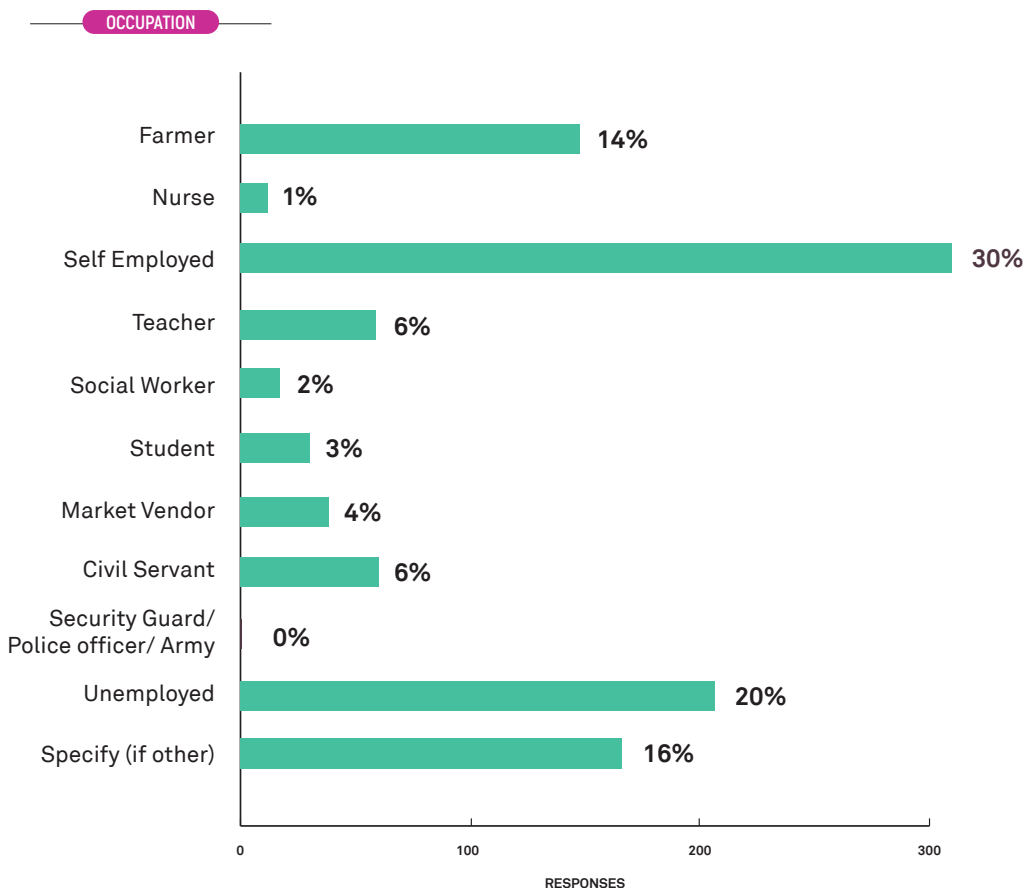
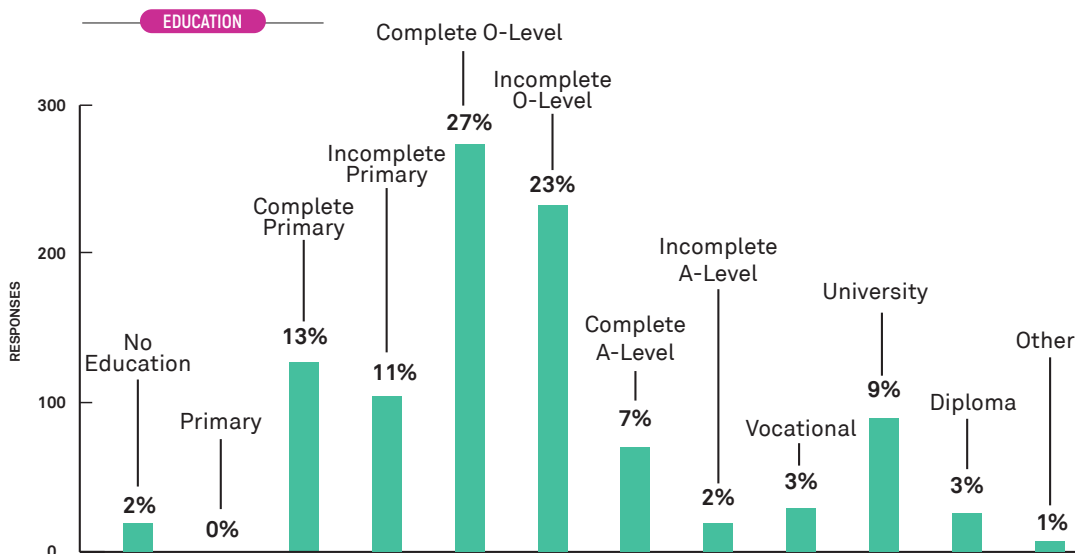
5.0. Telephone Surveys

Trac FM monitors demographic profiles of its listeners to ensure data quality. Following academic practice, a random selection of 500 respondents is made. Because of the campaign's subject matter, our emphasis was placed on female participants. Through telephone interviews, we collected follow-up answers and demographic data.

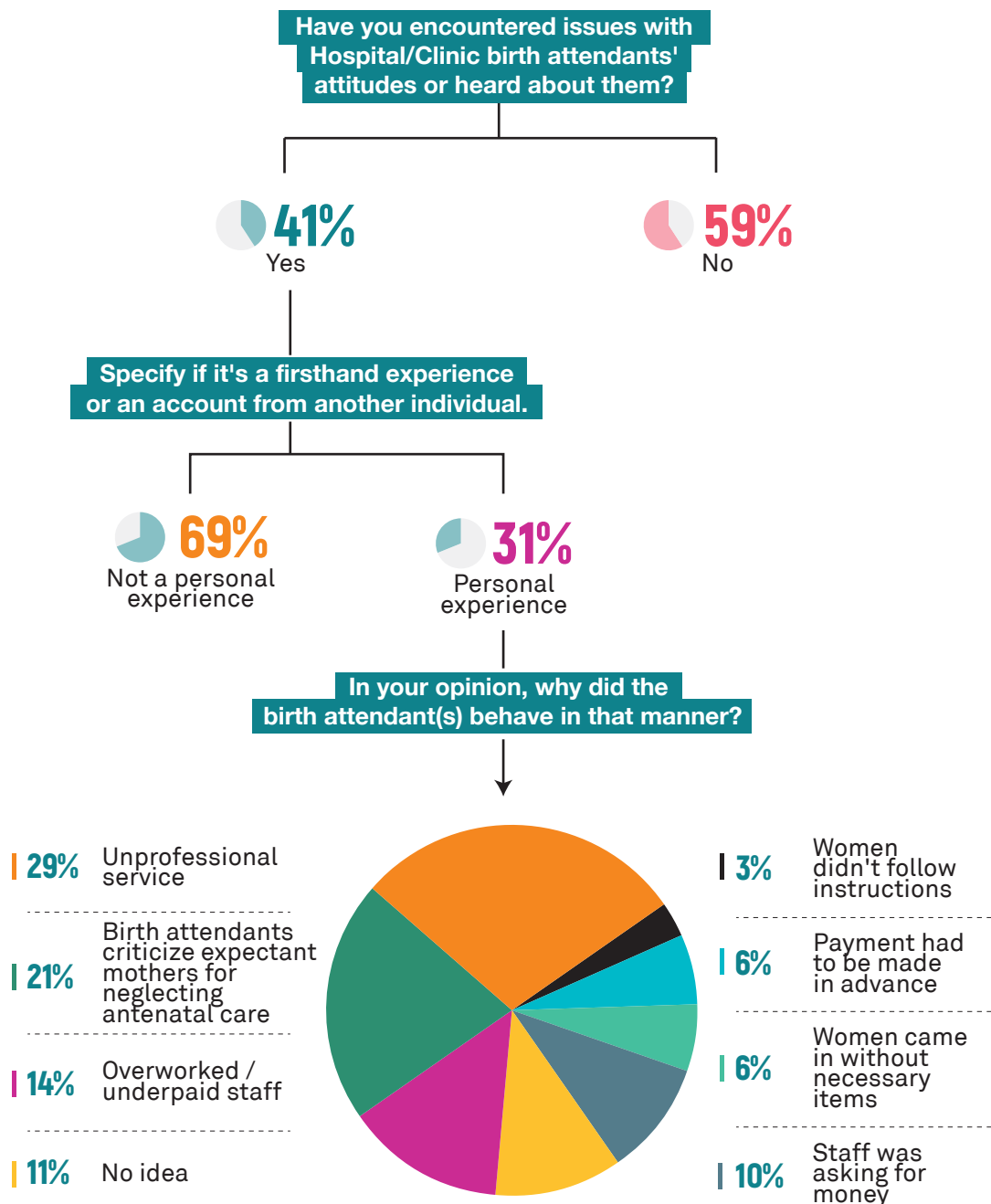
In the two surveys conducted, we asked profiling questions to get a better understanding of our respondents' background. In addition, we focused on assessing the radio campaign's impact and sought to gain deeper insights into matters concerning the healthcare staff's attitudes.

Demographic data





Indepth interviews



How important is it to have popular radio programs related to pregnancy, stillbirth and maternal care?

★★★★☆ 4.2

I learnt the importance of going for antenatal care to hospitals as I've been using traditional birth attendants.

Nabatanzi Immaculate

Kyampisi (Mukono)

I used to think the ultrasound would affect my baby negatively according to what I heard from other people. But the talk shows made me understand that it is important for the health of my unborn baby.

Namatovu Sofia

Kawempe Division (Kampala)

The causes of stillbirth, I can now take time and educate my children on how best they can prevent still birth.

Nalukwago Fatuma

Kawempe Division (Kampala)

it has helped me improve on my antenatal care visits, I used think it's not that important to start early antenatal care.

Nambejja Deborah

Kawempe Division (Kampala)



