IMPLEMENTATION BOTTLENECKS OF MATERNAL HEALTHCARE AT VAIOLA HOSPITAL IN TONGA.

by

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ABSTRACT

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Background: Tonga’s increasing maternal mortality rate indicates challenges in providing quality maternal healthcare at Vaiola hospital. The study analysed Tonga's maternal mortality ratio (MMR), identified knowledge gaps in recommended maternal health care, and recognized implementation bottlenecks and factors associated with the high maternal mortality.

Methods: The study used a mixed method sequential explanatory design. Data were sourced from the Ministry’s annual reports and the Maternal and Reproductive health registries to determine the maternal deaths for the year 2011-2022 and univariate analysis of the MMR using Stata SE version 17. A two-sample t-test was used to evaluate mean differences in a survey designed to assess the knowledge and practice gaps between doctors and midwives. A p-value of less than 0.05 was considered statistically significant. The study used a qualitative approach and included 15 doctors and midwives as well as 5 key informants from the administrative office who were purposefully sampled. A semi-structured interview was conducted using a guide that was digitally recorded, which was then verbatim transcribed. NVivo 14 Software was used for analysis.

Results: The maternal mortality ratio in Tonga is increasing and the MMR for 2022 was 274.4 maternal deaths per 100, 000 lives births. The differences in the knowledge and practice gap for the recommended maternal healthcare among midwives and doctors were statistically significant between those who did practice the recommended care (Mean=8.84, SD=2.01) and those who did not practice (Mean=2.16, SD=2.01); t (98) =16.585, $p<0.001$.
The study identified several major bottlenecks to providing quality maternal healthcare including a lack of political will reflected in ineffective leadership and poor governance translated into a lack of evidence-based maternal healthcare policies and guidelines, inadequate financial mechanisms, suboptimal quality of data leading to ineffective data-driven decision-making, inefficient supply chain management of essential medicine and blood products, low motivation and chronic dissatisfaction of staff due to low salary and lack of incentives, shortage of workers and increased workload causing burnout and affecting their mental wellbeing, inadequate in-service training and poor capacity building, a toxic working environment with negative organizational culture and poor implementation climate for successful execution of care for improved maternal health outcomes.
Conclusion: Urgently addressing maternal healthcare service bottlenecks and implementing evidence-based strategies is crucial to significantly reduce preventable maternal morbidity and maternal mortality.

Keywords: Maternal Healthcare, Implementation, Bottleneck, Maternal Mortality, quality of care, health system, Tonga