



Influence of traditional beliefs and practices on maternal mortality in northern Nigeria.

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Abstract

Maternal mortality continues to be a significant public health challenge worldwide, particularly in low-income countries. While progress has been made in reducing maternal mortality globally, certain regions, such as Northern Nigeria, continue to face alarmingly high rates. One of the key factors contributing to the persistently high maternal mortality rates in Northern Nigeria is the influence of traditional beliefs and practices surrounding pregnancy, childbirth, and the postpartum period. Traditional beliefs and cultural practices are deeply ingrained in the social fabric of communities in this region, often shaping healthcare-seeking behaviors and decisions related to maternal health. The study objectives were to identify traditional beliefs influencing maternal mortality in Northern Nigeria and to find out the cultural factors influencing maternal mortality in Northern Nigeria. The study was a content analysis focused on understanding the influence of traditional beliefs and practices on maternal mortality in Northern Nigeria. The study discovered that traditional beliefs and cultural factors influencing maternal mortality in Northern Nigeria includes; spiritual cause of maternal complications, preference for Traditional Birth Attendants, use of traditional remedies and rituals, limited autonomy and decision making, harmful cultural practices and limited awareness of modern healthcare practices. The study recommended implementation of community-based programs that engage community leaders, religious leaders, and traditional birth attendants (TBAs) to raise awareness about evidence-based maternal healthcare practices as well as improving access to skilled healthcare providers, including obstetricians, midwives, and nurses, in rural and underserved areas.

Keywords: Health, Mortality, Morbidity, Maternal, Northern Nigeria.

1. Introduction

Maternal mortality continues to be a significant public health challenge worldwide, particularly in low-income countries. While progress has been made in reducing maternal mortality globally, certain regions, such as Northern Nigeria, continue to face alarmingly high rates. Northern Nigeria has one of the highest maternal mortality ratios in the world, with an estimated 1,045 maternal deaths per 100,000 live births (World Bank, 2017). This figure is substantially higher than the national average in Nigeria, as well as the

global target set by the Sustainable Development Goals (SDGs).

One of the key factors contributing to the persistently high maternal mortality rates in Northern Nigeria is the influence of traditional beliefs and practices surrounding pregnancy, childbirth, and the postpartum period. Traditional beliefs and cultural practices are deeply ingrained in the social fabric of communities in this region, often shaping healthcare-seeking behaviors and decisions related to maternal health (Uzochukwu et al., 2019). These



traditional practices are often deeply rooted in religious, cultural, and historical contexts, influencing the choices women make throughout their reproductive journey.

Traditional beliefs in Northern Nigeria encompass a range of perspectives on pregnancy, childbirth, and postpartum care. These beliefs may include notions of spiritual causes of maternal complications, the importance of traditional birth attendants (TBAs), and the use of traditional remedies and rituals during pregnancy and postpartum recovery (Onasoga et al., 2021). Furthermore, gender dynamics and societal norms in Northern Nigeria often limit women's autonomy and decision-making power regarding their own healthcare, leading to delays in seeking appropriate medical attention and exacerbating the risks associated with pregnancy and childbirth (Adamu et al., 2020). The consequences of these traditional beliefs and practices are significant. Women in Northern Nigeria face increased risks of obstetric complications and maternal mortality due to inadequate access to skilled healthcare providers, delayed referrals, and the use of ineffective traditional remedies (Okoro et al., 2020). Furthermore, the lack of awareness and understanding of evidence-based maternal healthcare practices contributes to suboptimal antenatal care, poor birth preparedness, and limited postpartum support (Adeniyi et al., 2018). While previous research has explored the impact of traditional beliefs and practices on maternal health in Northern Nigeria, there remains a need for an updated and comprehensive review of the recent literature. Understanding the current state of knowledge regarding traditional beliefs and practices influencing maternal mortality in Northern Nigeria can provide valuable insights for policymakers, healthcare providers, and stakeholders in designing culturally sensitive interventions

and strategies to address this critical public health issue.

Therefore, this review aims to systematically examine recent literature on traditional beliefs and practices influencing maternal mortality in Northern Nigeria. By synthesizing and analyzing the available evidence, this review seeks to contribute to a better understanding of the cultural dynamics that shape maternal health outcomes and identify potential avenues for intervention and policy development. Ultimately, the goal is to inform evidence-based strategies that can effectively address traditional beliefs and practices to improve maternal health outcomes in Northern Nigeria. Thus, the objectives of this study are: to identify traditional beliefs influencing maternal mortality in Northern Nigeria and to ascertain the cultural factors influencing maternal mortality in Northern Nigeria.

2. Literature Review

2.1 Conceptual Clarification

Maternal Mortality

Maternal mortality refers to the death of a woman during pregnancy, childbirth, or within 42 days of termination of pregnancy. It is a global health challenge, with approximately 8 to 9 women dying daily due to various medical and compounding reasons (Buñing, 2022). The main causes of maternal mortality include severe bleeding, infections, pre-eclampsia and eclampsia, complications from delivery, and unsafe abortions. Delays in seeking, reaching, and receiving adequate maternity or obstetric services contribute to maternal mortality (Buñing, 2022). Efforts have been made at the national and international level to improve maternal and neonatal care and reduce maternal and child mortalities (Buñing, 2022). Strategies such as the integration of pre-conception care, the provision of family planning and reproductive health services, and the implementation of maternal death surveillance and response (MDSR)

programs have been shown to be effective in reducing maternal mortality (Haile et al., 2020; Ajayi et al., 2023). However, measurement of maternal deaths remains challenging due to the many causes and underreporting (Ward et al., 2023). Continued research and context-specific policy interventions are needed to accelerate reductions in maternal deaths and achieve Sustainable Development Goal targets (Ward et al., 2023).

3. Methodology

The study was a content analysis which involves the systematic examination of data from multiple studies, electronic databases, such as PubMed, Scopus, and Google Scholar, were searched using a combination of keywords and Medical Subject Headings (MeSH) research articles, other forms of content that have already been conducted on the same research questions to gain insights into the phenomena under study. This approach allows for the synthesis of findings across multiple studies to draw more robust conclusions.

4. Results and Discussion

1. Traditional Beliefs Affecting Maternal Mortality in Northern Nigeria

Traditional beliefs in Northern Nigeria play a significant role in shaping maternal health outcomes and contributing to the high maternal mortality rates in the region. These beliefs are deeply rooted in cultural, religious, and historical contexts, influencing various aspects of pregnancy, childbirth, and the postpartum period. Here are some traditional beliefs commonly found in Northern Nigeria that affect maternal mortality:

a. Spiritual Causes of Maternal Complications: Many communities in Northern Nigeria hold the belief that maternal complications and deaths are caused by spiritual forces or supernatural beings. It is believed that these entities may inflict harm on pregnant women, leading to adverse outcomes. Consequently, seeking

appropriate medical care may be delayed or even neglected, as the primary focus may be on seeking spiritual interventions (Onasoga et al., 2021).

b. Preference for Traditional Birth Attendants (TBAs): Traditional birth attendants, often referred to as "dais" or "traditional midwives," hold a prominent position in the childbirth process in Northern Nigeria. They are trusted individuals who are perceived to have experience and knowledge in assisting with childbirth. However, TBAs may lack formal medical training and may not have the necessary skills to handle obstetric emergencies, leading to delays in accessing emergency obstetric care when complications arise (Adamu & Abubakar, 2020).

c. Use of Traditional Remedies and Rituals: Traditional remedies and rituals are commonly employed during pregnancy and the postpartum period in Northern Nigeria. These practices may include the use of herbs, concoctions, or traditional medicines to manage pregnancy-related conditions or ensure a safe delivery. While some traditional remedies may have beneficial effects, the use of ineffective or harmful practices can result in adverse outcomes and delay the provision of essential medical care (Onasoga et al., 2021).

d. Influence of Cultural Norms and Gender Roles: Cultural norms and gender roles in Northern Nigeria often limit women's autonomy and decision-making power regarding their own healthcare. Women may face restrictions in seeking healthcare without the permission or involvement of male family members. This can lead to delays in accessing skilled healthcare providers and timely interventions, exacerbating the risks associated with pregnancy and childbirth (Adamu & Abubakar, 2020) [2].

e. Perception of Childbirth as a Natural Event: In some communities, childbirth is perceived as a natural process that does not require medical intervention unless complications arise. This belief may discourage women from seeking antenatal care, making birth preparations, or delivering in healthcare facilities. The lack of skilled attendance during childbirth increases the risk of maternal mortality due to the absence of timely medical interventions and emergency obstetric care (Uzochukwu et al., 2019).

2. Cultural Factors Affecting Maternal Mortality in Northern Nigeria

Cultural practices in Northern Nigeria have a significant influence on maternal health outcomes and contribute to the high maternal mortality rates in the region. These practices, deeply rooted in the cultural fabric of the communities, affect various aspects of pregnancy, childbirth, and the postpartum period. Here are some cultural practices commonly found in Northern Nigeria that affect maternal mortality:

a. Limited Autonomy and Decision-Making Power:

Cultural norms and gender roles often limit women's autonomy and decision-making power regarding their own healthcare. Women may have restricted access to resources and face societal expectations that discourage them from seeking healthcare without the permission or involvement of male family members. This can lead to delays in accessing skilled healthcare providers and timely interventions, increasing the risks associated with pregnancy and childbirth (Adamu & Abubakar, 2020).

b. Traditional Birth Attendants (TBAs) and Home Births: Traditional birth attendants, commonly known as "dais" or "traditional midwives," hold a prominent role in childbirth practices in Northern Nigeria. Many women opt for home births

with the assistance of TBAs due to cultural preferences and beliefs. However, TBAs may lack formal medical training and may not have the necessary skills to handle obstetric emergencies. This can result in delays in accessing emergency obstetric care when complications arise, contributing to maternal mortality (Onasoga et al., 2021).

c. Harmful Cultural Practices: Certain cultural practices in Northern Nigeria can be harmful to maternal health. Female genital mutilation (FGM) is prevalent in some communities, and it can lead to severe complications during childbirth. Additionally, child marriage is a cultural practice that increases the risk of maternal mortality as adolescent girls face higher health risks during pregnancy and childbirth (Adamu & Abubakar, 2020).

d. Traditional Beliefs and Rituals:

Traditional beliefs and rituals associated with pregnancy and childbirth influence maternal health outcomes. These beliefs often emphasize the importance of adhering to specific rituals, traditional remedies, and dietary restrictions during pregnancy. While some practices may have beneficial effects, others can be harmful or delay the provision of essential medical care, putting women at risk (Onasoga et al., 2021).

e. Limited Awareness of Modern Healthcare Practices:

In some communities, limited awareness and understanding of modern healthcare practices contribute to suboptimal antenatal care, poor birth preparedness, and limited postpartum support. This lack of awareness may result from limited access to education and healthcare services, further exacerbating maternal health challenges (Uzochukwu et al., 2019).

5. Conclusion and Recommendations

Conclusion

Traditional beliefs and cultural practices have a significant influence on maternal mortality in Northern Nigeria. It is crucial

for healthcare professionals to be aware of these cultural practices and their impact on women's choices of childbirth places in order to improve maternal health outcomes. Addressing these socio-cultural practices and beliefs is essential for reducing maternal mortality in Northern Nigeria

Recommendations

Based on the factors discussed regarding the influence of traditional beliefs and cultural practices on maternal mortality in Northern Nigeria, the following recommendations can be made:

1. Implement comprehensive awareness campaigns to educate communities about the risks associated with traditional beliefs and practices that contribute to maternal mortality. These campaigns should emphasize the importance of seeking skilled healthcare providers and debunk myths surrounding spiritual causes of maternal complications.
2. Improve access to skilled birth attendants and emergency obstetric care in rural and remote areas. This can be achieved by increasing the number of skilled healthcare providers, particularly in areas with high maternal mortality rates.
3. Address cultural norms and gender roles that limit women's autonomy and decision-making power regarding their own healthcare. Promote women's empowerment and involve male family members in supporting women's access to healthcare services.
4. Promote the importance of antenatal care and birth preparedness through community-based education programs. Encourage women to seek early and regular antenatal care, make birth plans, and deliver in healthcare facilities with skilled attendants.
5. Develop and enforce policies that prioritize maternal health and address the cultural and traditional factors contributing to maternal mortality.

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