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Use of Partograph to Identify Complications and Facilitate Referral Decisions by Health Providers at Peripheral Level

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Background

- In Bangladesh normal delivery services in union facilities are typically managed by a single female paramedic and a female support staff member. Identifying complications and ensuring referral is thus critical to prevent maternal and newborn deaths due to second delay.
- Proper maintenance of a partograph during labor can identify unsatisfactory progress in labor as well as maternal and fetal distress, and it aids in making appropriate referral decisions.
- MaMoni-HSS project introduced the partograph at union level health facilities in four districts.
- “Use of partograph in decision-making?”

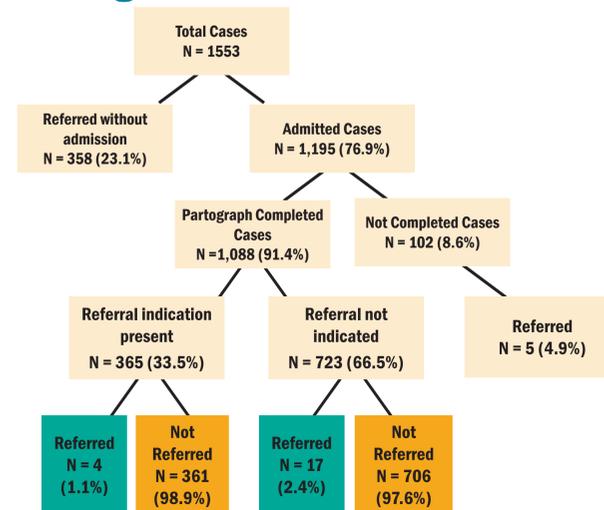
Objectives

- This study looked at what proportion of partographs were being used for monitoring progress and decision-making during labor by health care providers.
- To explore the barriers and motivating factors for using the partograph in Union Health Facility and Family Welfare Centers (UH&FWCs).

Methodology

- Study sites: Five UH&FWC in Habiganj District
- Study design: Mixed method
 - Quantitative: Review of completed partograph
 - Qualitative: Key informant interviews of health care providers
- Sample size: 1,553 cases; five key informant interviews
- Duration: July 1, 2013–June 30, 2014

Findings



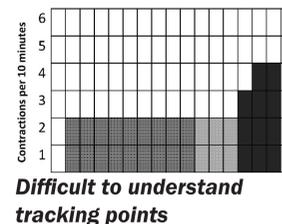
Decision to Refer

- Referred directly without partograph
- A big portion not referred; however, indication was present on the partograph

Completeness of Partograph

Problems Using the Partograph

- Health workers faced difficulties in plotting, especially in understanding the starting points (alert line).
- Referral considerations were not based on the partograph indication. Women were referred for other problems not plotted on the partograph.

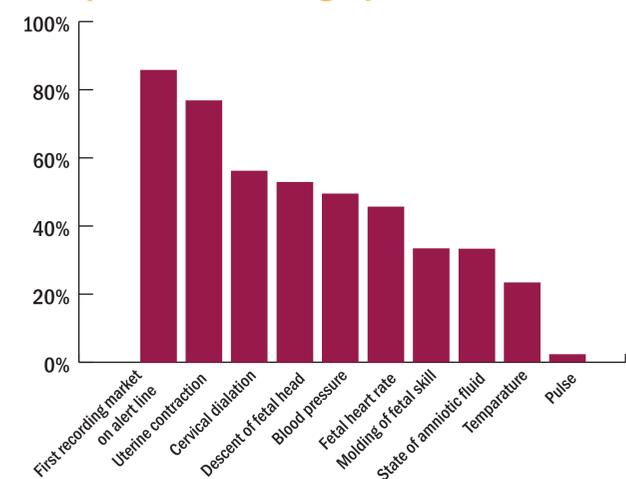


Completeness of Partograph, Continued

Reasons for Not Referring

- Family members don't want to go to referral health facilities
- Difficulties in transporting to higher level facilities
- Economic constraints of family

Components of Partograph



Conclusions

- Partographs were not completely filled out and not always used effectively.
- Competency-based partograph/refresher training with practical demonstration is needed.
- Regular supportive supervision and monitoring is needed.
- Simplify the partograph.