

Socioeconomic inequality and determinants of postnatal home visits made by public health midwives: An analysis of the Sri Lanka Demographic and Health Survey

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Introduction

Maternal and child health is emphasized in Sustainable Development Goal (SDG) 3 under the global rubric of good health and wellbeing. Assessing the postnatal services provided by Public Health Midwives (PHMs) in an equity sensitive manner helps to identify the gaps in home-based care which are unjustifiable. This study assessed the overall and sector-wise socioeconomic inequality in postnatal home visits made by PHMs in Sri Lanka and decomposed the observed socioeconomic inequality into potential determinants.

Methods

Data from the Sri Lanka Demographic and Health Survey (SLDHS) 2006-07 were used. Data were collected from ever-married women who gave birth to their last child in 2001 or later (up to 2007). 4893 ever-married women were included in the analysis. Whether the public health midwife visited the home to provide postnatal care within one month of the delivery was the health outcome of interest. Concentration indices were calculated and concentration curves were plotted to quantify the overall and sector-wise socioeconomic inequality. Decomposition analysis using probit regression was performed to estimate the contribution of potential determinants to the observed socioeconomic inequality.

Results

Overall, 83.0% of women were visited by a public health midwife within one month of the delivery. The highest number of home visits was reported in the rural sector (84.5%) and lowest was reported from the estate sector (72.4%). A pro-poor, pro-rich, and no inequality were observed across urban, rural, and estate sectors respectively. Wealth had a small contribution to the estimated inequality. Province of residence and the education level of women were the main determinants of the observed socioeconomic inequality.

Conclusion

Addressing the socioeconomic inequality of postnatal home visits made by PHMs should not be seen as a health system issue alone. The associated social determinants of health should be addressed through a multi-sectoral approach.