

DEVELOPMENT OF AN INTERVENTION PROGRAMME FOR THE PREVENTION OF COMPLICATIONS OF TUBERCULOSIS DURING PREGNANCY AND PUERPERIUM PERIOD, LIMPOPO PROVINCE, SOUTH AFRICA.

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ABSTRACT

The incidence of Tuberculosis has increased worldwide. High risk of Tuberculosis infection is attributed to the fact that mothers of childbearing age (15-44 years) are living with Human Immunodeficiency Virus. Despite the implementation of Basic Antenatal Care world-wide, mothers still present late at Antenatal Care facilities. Literature confirms that Tuberculosis in pregnancy represents a risk of maternal and neonatal complications. Factors associated with late presentation at Antenatal Care services after 14 weeks, aggravates the risk of late diagnosis and commencement of anti- Tuberculosis treatment.

The purpose of the study was to develop an intervention programme for the prevention of Tuberculosis complications during pregnancy and the puerperium period in Limpopo province. The objectives were to identify maternal and neonatal complications from records; to determine mothers' behaviours and socio-environmental factors contributing to late presentation at Antenatal Care centres.

The study followed a quantitative, qualitative and descriptive design. A non-probability purposive and convenient sampling approach was employed to select participants and hospitals; a random sampling approach was used to select records. A structured checklist with closed questions was used to collect data from records. Focus group discussions were conducted with midwives, mothers diagnosed and non-diagnosed mothers with Tuberculosis from ten selected hospitals.

The findings revealed that visits to Traditional Health Practitioners or use of traditional medicine and inaccessibility of Primary Health Care facilities were associated with delays in presentation for Antenatal Care services. Records revealed that abortion in mothers and low birth weight in infants could be associated with maternal Tuberculosis. A framework programme was developed for mothers to address shortcomings identified. Recommendations were based on improvement of the management of midwifery practices focusing on maternal Tuberculosis, health education and campaigns. Mentoring of newly qualified midwives in obstetric care, mothers are encouraged to seek Primary Health Care facilities once missed menstruation, family and community members are encouraged to give support to diagnosed mothers with Tuberculosis.

KEY WORDS: Tuberculosis, Pregnancy, Puerperium, Complications, Intervention programme.