

## **Health Policy and Women Development in Ondo State, Nigeria: A Critical Assessment of the Mother and Child Hospital, Akure**

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**Abstract:** Women all over the world particularly in Nigeria occupy a very significant position. This is because of their laudable role in the society. For instance, child bearing and other domestic activities that are naturally attached to them. However, these roles technically subject and expose women folk to more dangers than the men, particularly during child labour when most women face serious pains, and struggle between life and death. At this critical stage, the survival of mothers depends on the availability and quality of health facilities and services. In Nigeria, particularly in Ondo State, many women have lost their lives in the course of child bearing while some have developed one ailment or the other making them unfit to actively participate in the development process. As a result, the Ondo State Government initiated a policy which led to the establishment of mother and child hospital, primarily designed to handle pregnant women for the purpose of safe delivery and good health to further enhance women capacity for sustainable development. The paper adopted both primary and secondary methods of data collection to source its information. It was observed from the paper that mother and child Hospital impacted positively on women, although, majorly from the urban areas of the state. The findings also showed that the policy could not be sustained for various reasons ranging from funding problem, inadequate health personnel to inadequate drugs. The paper suggested that the policy of mother and child hospital be reviewed and redefined to ensure sustainability.

**Keywords:** Child, Development, Health, Hospital, Mother, Policy and Women

### **1. Introduction**

As part of the globalization and development agenda going on across the world, the clamour has been for the empowerment of women. All over the

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world today, the quest by most stakeholders, governments, policymakers, women leaders, women organizations, non-governmental organizations (NGOs) etc has been for gender sensitive policies such that would guarantee participation and involvement of women in development process. To this end, countries of the world have become signatories to many International agreements intended to boost the status of women and make them relevant in development process (Lawal, *et al*, 2016).

According to Anifowose (2004), women constitute half of the world's population and have contributed significantly to the well-being of the human race. In Nigeria, particularly, in Ondo State, women have played roles of mother, producer, home manager etc. Also, many women have lost their lives in the course of child bearing, while some have developed one ailment or the other making them unfit to actively participate in the development process. Little wonder the National Demographic Health Survey of 2008 put Ondo State as having the worst maternal and child care indices in the southwestern zone of Nigeria. The result of 2006 census in Nigeria put women at 48.78% of the national population, with this numerical strength, the women folk must be prevented from avoidable and preventable death and infirmity to enable them participate actively in development process.

In view of the foregoing, Ondo State Government in 2009 observed that majority of women in the state patronizes the Traditional Birth Attendant (TBA) otherwise called *Agbebi* who could hardly manage complications in the course of childbirth. And all pregnant women stand the risk of developing complications at any time, it could be during pregnancy or delivery or even after delivery. Therefore, the need for referral centre, adequately equipped with necessary facilities, medications and competently trained health workers becomes imperative. It was also observed that most prefer to patronize TBA based on poor income and high level of poverty, which was also responsible for high maternal mortality rate in the state prior to 2009.

To this end, government came up with a policy that could actually address this problem of maternal mortality and ensures quality care and qualitative life for Ondo State women. Consequently, Mother and child Hospital, Akure was established in 2010 as best alternative to the challenges of poor maternal mortality and childcare in the state.

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### **1.1: Objective of the Study**

The major objectives of this study is to assess through empirical investigation, the impact of Mother and Child Hospital, on women development in Ondo state with specific focus on Mother and Child Hospital, Akure.

### **1.2: Research Questions**

- 1) Has Mother and Child Hospital, Akure impacted positively on women in Ondo State?
- 2) Has the performance of Mother and Child Hospital, Akure, improved the maternal health in Ondo State?
- 3) What are various challenges constraining the effective performance of Mother and Child Hospital, Akure?

### **1.3: Scope of the study**

The study covered the period of 2009 to 2018 with specific focus on health policy and women development in Ondo State, Nigeria, a study of Mother and Child Hospital Akure. Albeit, some pieces of information that are not within the purview of the scope were utilized in the course of analysis.

### **1.4: Understanding the concepts**

**Mother and Child Hospital:** This is a health institution that takes care of the welfare of women in pregnancy and offers free health care to their children from delivery till they are five years old (Akinmade, 2011).

**Public policy** is perceived as a well thought out statement and coordinated plan of action by government to address and solve identified problems facing members of the public (Olaoye, 2013).

**Maternal health** is described as the health of women during pregnancy, child birth, and the post partum period. It encompasses the health care dimensions of family planning, preconception, prenatal and post natal care in order to reduce maternal morbidity and mortality (World Health Organization, 2014).

**Development** according to Gboyega (2003) implies improvement in material well being of all citizens, not the most powerful and rich alone, but everybody in the society. It demands that poverty and inequality of access to the good things of life be removed and drastically reduced. It seeks to improve personal physical health, security and livelihood and expansion of life chances (Lawal and Ogunro, 2012).

## **2: Theoretical Framework**

Based on the nature of this study, the attainment of objective model is employed as a framework of analysis for adequate, deeper and scientific understanding of the study. This model was specifically designed for programme and policy evaluation. The model assumes that the success of a programme or policy can be determined by measuring policy outcomes against its own goals and objectives.

According to Deshler (2006) a major proponent of the model, submitted that an evaluation of a programme or policy begins with clarifying measurable objective and gathering of data that validate the extent to which these objectives have been realized. He sees objectives as efforts or actions that are intended to attain or accomplish in nearest future. Deshler describes goal as purpose toward which an action or endeavour is directed. Outcome, according to him, is the end result or consequence that follows from an action, that is event that is produced as a result of a plan, effort, process or action.

In his submission, he came up with the basic tenets or principles of the attainment of objectives model, he insists that for the model to be credible, the following tenets must be present; that the objectives must be clearly stated; that the objectives should be measurable; there must be field collection of data that will enable the outcome and objective to be measured and validated; the appropriateness of goals and objectives must be evaluated given the circumstances and needs of the beneficial or and users of such programme (Deshler, 2006).

This model is relevant to this study in the sense that the mother and child hospital was established to achieve some objectives in Ondo State. These objectives range from safe delivery, reduction in maternal mortality rate, access to modern health facilities to general development of women folk. To this end, the study is set to measure the performance or outcome of the mother and child hospital against its goals and objectives to determine its success or otherwise.

### **2.1: Historical Overview of Mother and Child Hospital, Akure (MCHA)**

Consequent upon the high maternal mortality rate in Ondo State prior 2009, the need for a well structured and functional 2-way referral system, from the basic and comprehensive health facilities became practically

exigent. This attendant led to the establishment and construction of the Mother and Child Hospital, Akure (MCHA) as the apex referral centre, commissioned in February 27, 2010 to run an integrated maternal and child care facility fully promised to offer qualitative and critical interventions when required (Mimiko, 2013).

As at the time of its creation in 2010, it was only tertiary maternity facility in Nigeria offering free health services including free consultations, admissions, medication, blood transfusions and surgical operations to the teeming masses irrespective of social status, ethnicity or place of residence. It also served as the busiest maternity centre in the southern part of Nigeria and one of the busiest in the whole country (Mimiko, 2013). Within six months 11,175 under-five were been registered and treated and 8,119 antenatal patients, 3,727 deliveries including over 585 surgeries. An average of 20-25 deliveries were recorded per day making the mother and child Hospital the busiest hospital in the state and in neighbouring states (Sunrise Ondo, 2012). Within 15months of its operation, the Mother and Child Hospital in Akure attracted 10,315 pregnant women and had a safe delivery of 14, 216 babies in a qualitative medical environment where such services are rendered free of charge.

As at June, 2012, (40 months of operations) 75,305 registered patients including 41,885 under 5 and 35,420 pregnant women. 16, 467 safe deliveries including 2,993 caesarean sections and 9,582 pediatric admissions. Between 2010 and 2012 there was 589 increases in patient registrations 96% increase in number of births, 47% reduction in maternal mortality ratio and corresponding 48% decrease in health care financing per patient. Similarly, 26% increase in children admissions resulted in corresponding 26% reduction in child mortality (Mimiko, 2013).

It recorded more than 7,000 safe births in 2013 and produced an average of 20 babies per day making Ondo State the largest baby producing state in Nigeria as at 2014 (Fayeun, 2014). Table 1 and 2 below show the Health statistics of Mother and Child Hospital, Akure between 2010 and 2016.

**Table 1: MCHA Maternal Health Statistics 2010-2012**

Year	Total Registration	Maternal Rate	Mortality
2010	7,378	742	

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2011	8,376	638
2012	11,665	390
Total	27,419	1,770

Source: Ondo State Ministry of Health, 2013

**Table 2: MCHA Maternal Health Statistics 2013-2016**

Year	Total Registration	Maternal Mortality rate
2013	7639	521
2014	6,197	428
2015	5,421	370
2016	4,860	299
Total	24,117	1,618

**Source:** Mother and Child Hospital, Akure, 2017.

From the tables, it can be inferred that Mother and child Hospital actually attracted patients particularly, the pregnant women from the nook and cranny of the state. It is to be noted at this juncture that the large number of patients often recorded on regularly basis at the Mother and Child Hospital, Akure, facilitated the establishment of another Mother and child Hospital, in Ondo City, Ondo State in 2012. This might actually explain the steady reduction of patients' registration at the MCHA from 2013 to 2016 as shown in table 2. Presently, Mother and Child Hospitals in Ondo State no longer offer free medical services as a result of dwindling economy.

### **3: Research Methodology**

The study utilized both primary and secondary sources of data collection. The primary sources (Survey type) included oral interview and questionnaire while texts, documentaries and the internet served as sources for secondary data. This mixed method approach was employed based on the fact that the strength of one method often offset the weakness of another. Also, data that is available via one of the methods may not be available through any other approach, therefore, a wide data base is assured and guaranteed as it will uncover the viewpoints of different stakeholders thereby increasing and enriching the validity and accuracy of the findings.

In the course of generating relevant data, two local governments each were purposively selected from each senatorial zone. This was done to

ensure adequate and equal representation. The selected local governments were; Akure South and Idanre from Central Senatorial District, Ose and Akoko North East from Northern Senatorial District while Ese Odo and Okitipupa were selected from the southern Senatorial District. Both rural and urban local governments were considered in the selection process to ensure the participation of both rural and urban women in the study.

The sample frame for the study included women who were patients at Mother and Child Hospital, Akure, such as (pregnant Women, Nursing Mothers), Health workers (the staffers of the Mother and Child Hospital, Akure), and Government Officials (political office holders both former and present), Public Servants from relevant Ministries, Agencies and Parastatals). These groups were selected because they are all stakeholders. Some are providers of health infrastructure and services, some are implementers of health policy or programme while some are end users or beneficiaries of the health services in the state. As such, they are in a much better position to know the state and activities of the Mother and Child Hospital, Akure, since its inception and provide accurate, valid and reliable information.

Questionnaires were distributed, administered and retrieved in each selected local government area accordingly. Population of these local governments was taken to cognizance in the process of questionnaires distribution and administration, which also accounted for variation in numbers (see table 1). In-depth interview was equally conducted with the identified groups in the sample frame to complement the questionnaires earlier administered (see table 2). Simple percentage analysis was used and the analysis was also descriptive in nature.

**Table 3: Outlay for Distribution, Administration and Retrieval of Questionnaire in the Sampled Areas.**

Senatorial District	Selected Local Government	No Of Questionnaire Distributed And Administrated	No of Questionnaire Retrieved	Total
Ondo North	Ose	38	33	63
	Akoko North East	36	30	
Ondo	Akure South	150	144	180

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Central	Idanre	48	36	
Ondo South	Ese Odo	56	42	93
	Okitipupa	65	51	
Total		393	336	336

Source: Field Survey, 2018.

**Table 4: Outlay for Interview Selection**

S/N	Local Area/Ministry /Parastatal /Others	Government Agency /	No of Respondent
1.	Ose LGA		4
2.	Akoko North East LGA		4
3.	Akure South		15
4.	Idanre		4
5.	Ese Odo		5
6.	Okitipupa		5
7.	Mother and Child Hospital, Akure		10
8.	Ministry of Health, Akure		2
9.	Health Management Board, Akure		2
10.	Governor's Office		3
11.	Others (Former Political Office Holder)		3
Total:			57

Source: Field Survey, 2018

**4: Data Presentation and Analysis**

This section shows the data collected through questionnaires and interview. The aim of this section is to show the performance and impact of Mother and Child Hospital, Akure, particularly on women development.



**Table 5: Demographic Information of the Respondents**

Characteristics	Akoko North East		Ose		Akure South		Idanre		Okitipupa		Ese Odo		Sample Average	
Age	F	%	F	%	F	%	F	%	F	%	F	%	F	%
18-20	4	13.3	2	6.1	15	10.5	4	11.1	7	13.8	8	19.0	40	11.9
21-29	17	56.7	21	63.7	92	63.9	18	50.0	22	43.1	14	23.4	184	54.8
30-39	6	20.0	9	27.2	25	17.3	10	27.8	12	23.5	12	28.6	74	22.0
40 and above	3	10.0	1	30.0	12	88.3	4	11.1	10	19.6	8	19.0	38	11.3
<b>Occupation</b>														
Public service	3	10.0	7	21.3	22	15.2	3	8.3	8	15.7	2	4.8	45	13.7
Private service	2	6.7	3	9.1	18	12.5	3	8.3	2	4.0	-	-	28	8.3
Self employed	10	33.3	10	30.3	46	32.0	10	27.8	20	39.2	18	42.9	114	34.0
Unemployed	15	50.0	13	39.3	58	40.3	20	55.6	21	41.1	22	52.3	149	44.3
<b>Education</b>														
Primary	15	50.0	10	30.3	28	19.4	13	36.1	21	41.1	16	38.0	103	30.7
Secondary	8	26.7	15	45.5	85	59.1	11	30.5	19	37.3	10	23.9	148	44.0
Tertiary	3	10.0	5	15.1	25	17.3	6	16.7	2	4.0	4	9.5	45	13.4
None	4	13.3	3	9.1	6	4.2	6	16.7	9	17.7	12	28.6	40	11.9
<b>Income</b>														
High	2	6.7	4	12.1	31	21.6	4	11.1	3	5.9	1	2.4	45	13.4
Low	24	80.0	23	69.7	74	51.3	30	83.3	41	80.0	30	71.4	222	66.1
Medium	4	13.3	6	18.2	39	27.1	2	5.6	7	13.8	11	26.2	69	20.5
<b>Marital Status</b>														
Married	28	93.3	33	100	130	90.3	36	100	48	94.1	38	90.5	313	93

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Single	2	6.7	-	-	12	8.3	-	-	2	3.9	4	9.5	20	5.9	
Divorce	-	-	-	-	2	1.4	-	-	1	2.0	-	-	3	0.9	

Source: Field Survey, 2018

From Table 3, it is observed that respondents within the ages of 21-29 and 30-39 have 54.8% and 22% respectively, serving as highest and second highest percentages. This clearly shows that 76.8% of the respondents fall within an active age of child bearing. It therefore implies that reasonable number of respondents would give reliable and accurate information on the subject matter.

The Table also indicates that 44.3% respondents that participated in the study were unemployed, while 66.1% were low income earners. This clearly shows that most women, particularly those within the ages of child bearing with low income would possibly and unavoidably patronize the Mother and child hospital because of its free services. It can also be observed from the table that 30.7% had primary education and 44% had secondary education. The implication of this is that 74.7% of women that were involved in the study had formal education and could conveniently respond to questions.

The marital status of the respondents as shown in the table indicated that 93.2% were married. It therefore implies that majority of the respondents were once or presently involved in child bearing and as a result, are mothers who could authoritatively respond to questions.

**Table 6: The responses frequencies and percentage of the respondents.**

S/N	Questions	Frequencies			Percentage		Don't know
		Yes	No	Don't Know	Yes	No	
1.	Were you given the necessary drugs during your stay at the Mother and Child Hospital, Akure?	332	1	3	98.8	0.3	0.9
2.	Were you given free medical services?	335	-	1	99.7	-	0.3

3.	Were you given adequate attention and treatment during labour?	301	28	7	89.6	8.3	2.1
4.	Did you believe Mother and Child Hospital, Akure has prevented you from unnecessary stress and cost?	322	8	6	95.8	2.7	1.8
5.	Has mother and Child Hospital, Akure improved you maternal health?	330	2	4	98.2	0.6	1.2
6.	Do you believe that Mother and Child Hospital, Akure has impacted positively on women in Ondo State?	312	16	8	92.9	4.8	2.3
7.	Will you visit mother and child again?	55	270	11	16.4	80.4	3.2

Source: Field Survey, 2018.

From the Table, 98.8% agreed to have received necessary drugs during delivery periods. It was also shown that free medical services were offered to patients as over 99% respondents claimed to have been given free medical services.

The Table also shows that 95.8% agreed that Mother and Child actually prevented them from unnecessary stress and cost. In similar vein over 98% respondents said that their maternal health has greatly improved through the intervention of Mother and Child Hospital Akure. The Table also confirmed that adequate attention and treatment were received by the patients from the mother and child Hospital as more than 89% indicated in the Table.

From the Table, large number of respondents above 90% agreed that Mother and Child Hospital, Akure has impacted positively on women in Ondo State.

However, the table shown that only 55% of the respondents were willing to visit the Mother and Child Hospital again, while 80.4% were not willing to patronize the Mother and Child Hospital again.

Interviews were also conducted with the respondents. From the interview conducted, a question was raised on whether the Mother and Child Hospital was doing well in terms of performance. The respondents agreed that the Hospital has been performing greatly since its establishment. The respondents averred that the services of the hospital remain one of the the

best in terms of quality and quantity. According to one of the respondents “The Hospital attends promptly to patients, gives adequate drugs, works round the clock and responds to emergencies without discrimination”. However, the respondents explained that since 2016, the services at the mother and child Hospital have greatly reduced both in quality and quantity with low patronage. The respondents said that women were no longer interested in visiting the Hospital for Maternal care, and now prefer to visit a nearby hospital since the mother and child Hospital no longer offer free services.

Another crucial question was asked on whether the mother and child hospital has contributed positively to women development in Ondo State. All the respondents agreed that the Hospital has contributed immensely to women development in the state. One of the respondents who was also a staffer in the mother and child Hospital claimed that many lives have been saved through the benevolent services rendered by the hospital. The services bills that would have been difficult if not impossible for most women, especially the low income earners to pay were shouldered by the Hospital. The respondents explained that women were delivering babies with less or no injuries as a result of prompt response to cases and emergencies.

A question was raised on the challenges faced by the Mother and Child Hospital. The respondents mentioned inadequate personnel as a critical problem confronting the Hospital. Because of large number of patients on regular basis, the ratio of medical personnel to patients is very low, the available staffers are not enough for the busy job of the Hospital. According to the respondents, funding is another critical area that obstructs the efficiency of Mother and Child Hospital. Funding is inadequate most facilities that require regular maintenance are not maintained due to inadequate funds. The respondents also complained of the refusal of government to pay the staffers of the Hospital their special allowances. Another problem that was mentioned by the respondents was inadequate drugs. Since the free medical services were no longer available, government had stopped free supply of drugs to the hospital, presently, the hospital buys drugs with the little money made from charges for its services and these drugs are not meeting the needs of the hospital.

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## **5: Discussion of Findings**

It was revealed from the study that the Mother and Child Hospital Akure, performed creditably well between 2010 and 2016. It was observed that maternal mortality rate in the state was drastically reduced within these periods. According to one of the respondents from Idanre town, “I thanked Mother and Child Hospital, Akure for giving me free medical treatment, if not for this free services I received from the Hospital, the whole of my business money and my savings would have gone for my treatment.” The implication of this is that MCHA had saved many women from both health and economic crises.

The findings also revealed that women were attracted to MCHA because of its qualitative and free services offered. Therefore, it would not be out of place to state that many women in Ondo State would have lost their lives during child birth but for MCHA, particularly those who would have found it difficult to pay huge bills based on their poor income. The study revealed that establishment of MCHA greatly reduced patronage to traditional birth attendants who neither acquire nor possess the necessary skill to handle cases of delivery and emergencies.

Further findings show that MCHA had impacted positively on women, particularly, the pregnant women and nursing mothers through free medical services, safe deliveries, free drugs, free surgical operations etc. it was found that most women from rural areas could not access MCHA as a result of long distance. The Hospital was located in urban centre, Akure, the capital city of Ondo State, so, majority in remote areas could not enjoy the free health services of the state government. Hence, these people are part of electorate and citizens who are supposed to be affected by government policies and decisions.

It was obvious from the study that MCHA was confronted with various challenges ranging from inadequate staff, inadequate funding to inadequate drugs. Although, the findings shows that the problem of inadequate funding and inadequate drugs surfaced at the later stage of the institution, which actually made government to commercialize its activities and services.

## **6: Conclusion and Recommendations**

As observed from this study and based on its results, it could be concluded that the policy that established the Mother and Child Hospital,

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Akure was a good policy in right direction. Obviously, the policy was designed to solve the increasing rate of maternal mortality in the state, it was discovered from this study that after the establishment of the Mother and Child, Hospital, Akure, the maternal mortality rate started to decrease gradually until 2016, when the policy contents were changed by the government. This change abruptly ended the hitherto free services offered by the institution and introduced compulsory payment for all services including drugs acquisition.

Significantly, the Mother and Child Hospital, Akure performed effectively and impacted positively on women, especially within the periods of 2010 to 2016.

However, from the analysis, it was observed that the policy that established the Mother and Child Hospital, Akure, did not consider future exigencies as the policy was shortsighted and elitist in nature. This was further resulted to sustainability problem and consequently policy reversal. The great lesson from this study, particularly, to governments and policy makers is the need to put into cognizance, the various variables or factors that ensure sustainability when designing public policy and to carry citizens along in the process of public policy making.

Presently, as noted from the study, not many women were willing to visit the mother and child hospital again as observed in table 6. This was basically caused by the change in policy contents, that is, the introduction of payment (high cost) for all services by MCHA contrary to the initial policy design. To be sure, if affordable charges had been attached to services and drugs offered by the MCHA at the outset, it would have been easy for government to maintain and also convenient for people to continue to patronize the institution, thereby ensuring its sustainability. Most women do not see any significant difference again between the mother and child hospital and other health institutions in the state. As a result, some may go back to Traditional Birth Attendants for their antenatal care and delivery purposes, which tends to jeopardize the purpose of creating Mother and Child Hospital in the state.

In view of the foregoing, the following recommendations were adduced. The policy of the mother and child hospital needs to be revisited and redesigned to ensure affordability, accessibility and sustainability.

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Government should reduce the charges (high cost) placed on its services to enable the low income earners continue to patronize the hospital. Mother and child hospitals should also be created in rural or remote areas of the state to enable rural women access the services. The present two in the state are located in urban areas of Akure and Ondo city, the same senatorial district, called Ondo Central. The people of other senatorial district, Ondo North and Ondo South should be considered in the creation of the hospitals. The policy should be redesigned to accommodate future exigencies, it must therefore be a long time and inclusive policy framework that can be sustained.

In addition, government should ensure that the required number of personnel, particularly, health personnel are employed into the services of the institution with motivating allowances and other fringe benefits. Government should try and increase the funds of the institution, since health is wealth, it is therefore important for government to adequately fund health institution, especially, this one that is specially created to safe lives of mothers, babies and children. Adequate funding will definitely make possible and available the essential drugs require for effective functioning.

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### References

- Akinmade, K. (2011). Health Revolution in Ondo State. *Sunrise Ondo*. Akure: Ondo State Ministry of Information.
- Anifowose, R. (2004). Women Political Participation in Nigeria: Problems and Prospects. In a. Akinboye (Ed.), *Paradox of Gender Equality in Nigerian Politics*. Lagos: Concept Publication.
- Deshler, D. (2006). Evaluating Extension Programmes. Retrieved from <https://www.fao.org/docrep/w58306w58030ed.htm>. Accessed 10th August, 2014.
- Fayeun, T. (2014). The Punch, July 28 2014.
- Gboyega, A. (2003). Democracy and Development: the Imperative of Local Governance an Inaugural Lecture 2003, University of Ibadan.
- Lawal, T & Ogunro, V. (2012). Democracy and Development in Nigeria. *International Journal of Development and Sustainability* 1(2). Pp448-445.
- Lawal, T., Ogunbodede, N., & Siyaka, M., (2016). The Impact of Maternal Health Programme on Women Development in Ondo State. *Journal of Strategic and Development Studies* 1 (1), pp 273-279.
- Mimiko, O. (2013). Govt. Mimiko, Ondo State Discusses Infant Maternal Health Programmes with U.S. Media. Retrieved From <http://www.amipnewsonline.org>. Accessed 9th September, 2014.
- National Population Commission (2006). The 2006 Census. Abuja.
- Olaoye, E.G. (2013). Public Policy as Dividends of Democracy: an Appraisal of the Abiye Safe Motherhood Programme in Ondo State, Nigeria. *Journal of Developing Countries Studies*. 3 (8) pp150-162.
- Sunrise Ondo (2012). Away From our Shores, Maternal and Infant Mortality. Ondo State Ministry of Health Publication.
- World Health Organization (2004). International Classification of Diseases ICD, 10th Revision. Geneva, W.H.O. Publication.



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## Appendices

### Appendix A

#### Questionnaire

Dear respondents,

These research questions are purely for academic purpose. It is intended to elicit information on the Mother and Child Hospital, Akure. Any information volunteered shall be treated confidentially.

Please indicate your answer below.

Tick (✓) where appropriate

#### Section A.

- a. Age: 18-20 [ ], 20-29 [ ], 30-39 [ ], 40 and above [ ]
- b. Occupation: public service [ ], private services [ ], self-employed [ ], unemployed [ ]
- c. Highest education attainment: Primary [ ], secondary [ ], tertiary [ ], none [ ]
- d. Level of income: high [ ], medium [ ], low [ ]

#### Section B

1. Have you visited the Mother and Child Hospital, Akure for antenatal care? Yes [ ] No [ ] don't know [ ]
2. Were you given the necessary drugs during your stay at the Mother and Child Hospital, Akure? Yes [ ] No [ ] don't know [ ]
3. Did you enjoy free services? Yes [ ] No [ ] don't know [ ]
4. Can you describe the nature of the free services? Yes [ ] No [ ] don't know [ ]
5. Were you given adequate attention during labour? Yes [ ] No [ ] don't know [ ]
6. Do you believe Mother and Child Hospital, Akure has prevented you from unnecessary cost and stress? Yes [ ] No [ ] don't know [ ]
7. Has Mother and Child Hospital improved your maternal health? Yes [ ] No [ ] don't know [ ]
8. Did you believe that mother and Child Hospital, Akure has impacted positively on women in Ondo State? Yes [ ] No [ ] don't know [ ]
9. Will you visit Mother and Child Hospital again? Yes [ ] No [ ] don't know [ ]

Give reasons for your answer.....

10. What are the problems you observed during your stay in Mother and Child Hospital, Akure?
11. How can these problems be solved?

### **Appendix B**

Interview guide for the respondents.

1. As a worker in the Mother and Child Hospital, do you believe in the free health services rendered to the public?
2. Can this policy be sustained?
3. As an insider, are there adequate drugs in the Hospital?
4. Are there adequate trained medical personnel?
5. What is the ratio of patients to a Doctor?
6. As a professional health worker, what is the state of the health facilities and equipments in the hospital in terms of quality and quantity?
7. In your assessment, what makes mother and child hospital different from other health related institutions in the state?
8. Do you think Mother and Child Hospital is doing well in terms of performance?
9. As part of the implementation team of this initiative, do you think the hospital has contributed positively to women development in Ondo State?
10. What are the challenges facing this Hospital?
11. From your own view, how can these challenges be tackled?
12. As a patient, how would you describe the performance of Mother and Child Hospital, Akure?
13. In what ways has the Hospital contributed to Women Development in Ondo State?

### **Appendix C**

Interview guide for government officials

1. What informed the establishment of the Mother and Child Hospital, Akure?
2. How is the Mother and Child Hospital funded?

3. As part of the major initiators of this Hospital, what are its basic fundamental objectives?
4. From your own perspective, do you think the Hospital is fulfilling its purpose?
5. Judging from the activities of the Hospital in the past years, do you think it has impacted positively on women development in Ondo State?
6. Based on your judgment, has the facilities in the Hospital be regularly maintained?
7. As part of government, do you think this free Health Services is sustainable?
8. What are the various challenges faced in running of this institution?
9. How can these challenges be surmounted?