

## FACT SHEET 1: MATERNAL AND CHILD HEALTH

### Maternal health

#### High utilisation of services

The health of the mother during pregnancy directly impacts on the child's health. The study found that 97% of pregnant mothers had accessed antenatal care during pregnancy and that around three-quarters (71.4%) had received antenatal services five times during their pregnancy. Around half of women (46.5%) attended antenatal care before 20 weeks of pregnancy and 95.5% had been offered an HIV antibody test. Despite high levels of access to services, maternal mortality remains high in the country suggesting a need to focus on the quality of health services particularly in the maternity and neonatal care.

#### Birth attendance

Having a trained birth attendant is necessary for the survival of infants and mothers during childbirth. In South Africa the majority of children under the age of two were born in a health care facility (see Table 1) and were attended by health workers – usually a nurse or midwife (66.7%) with around a quarter being attended by doctors (27.6%). However, despite the high utilisation rate of services, the risk of child mortality remains high in South Africa.

Table 1: *Birth details of children under two years old, South Africa*

Variable	Percentage (%)
Hospital	76.7
Clinic	18.2
Home or other	5.0
Don't know	0.1
<b>Attendant at delivery (n = 1 609)</b>	
Doctor	27.6
Nurse/midwife (healthcare worker)	66.7
Traditional birth attendant, or other	4.7
Don't know	1.0

#### Postnatal care

The study found that the majority of children have access to public health services in South Africa and that children are mostly taken to a health-care provider for health checks, immunisation or due to ill-health.

#### Low immunisation rates among children under two years

In general, with the exception of BCG, there are low immunisation rates among children to prevent communicable childhood diseases. Table 2 compares WHO/UNICEF estimates with the results of the current survey.

Table 2: Immunisation status among children aged 12–23 months by specific vaccines, South Africa 2008

Antigen	WHO/UNICEF estimates 2008	Sample size	Health of Children Survey 2008 % coverage
BCG	81.0	776	85.5
DPT1	77.0	776	72.8
DPT3	67.0	776	62.6
Polio3	65.0	776	67.2
Measles containing vaccine	62.0	776	64.8
HepB3	67.0	776	56.3
Hib3	67.0	776	45.2

### Infant feeding practices: High prevalence of mixed feeding

Feeding practices have a direct impact on the survival of infants as it affects their nutritional status, growth and general health. The study found that mixed feeding was the most common method of feeding in South Africa with only 25% of infants exclusively breastfed during their first six month. Another 22.5% of babies were exclusively formula-fed and the remainder (51.3%) received mixed feeding consisting of breast milk, formula milk and other solid foods. Solids were sometimes introduced at an early age – sometimes to infants who were less than one month old. The high levels of mixed feeding are of concern in a country with high rates of HIV prevalence as this increases the risk of HIV infection, illness and death among children.

Table 3: Feeding practices among infants during the first six months after birth

Type of feeding	n	Exclusive breastfeeding %	E Exclusive formula fed %	Mixed feeding %
Total	508	25.7	22.5	51.3
Urban formal	259	22.6	20.7	56.7
Urban informal	66	39.4	36.1	24.5
Rural formal	143	27.2	20.2	51.6
Rural informal	40	19.3	28.5	52.2

## Recommendations

### Maternal health

Introducing a policy on providing HIV positive women with antiretroviral treatment (ART) when their CD4 count drops to under 350 mm cells/mm<sup>3</sup> might save many women's lives. Furthermore, introducing a quality improvement and quality assurance system in all maternity care units or clinics is crucial to ensuring women obtain good health services.

### Infant and child nutrition

The current policy and approach to the promotion and support of exclusive breastfeeding should be revised to put a stronger focus on community and home-based support for mothers.

The HIV and infant feeding guideline in South Africa should be updated based on the new WHO Rapid Advice so as to include the provision of antiretroviral therapy for the HIV-positive mothers or for HIV-exposed infants. This will significantly reduce the risk of postnatal transmission of HIV through breastfeeding.

**Note: *Health of our Children in South Africa*, Shisana et al, is a national HIV/AIDS and health survey conducted in 2008 by a consortium led by the Human Sciences Research Council (HSRC). The survey included 8 966 children aged 0-18 years. The full report is available on [www.hsrbpress.co.za](http://www.hsrbpress.co.za).**