Abstract

Background: Increase in Caesarean Section (CS) delivery rate has become a major global public health concern due to its risks and costs in comparison to normal vaginal births. Tanzania is not exceptional on rising rate of CS; however not all CS are done for medical reasons. Therefore, this study explored non-medical reasons for CS birth in public health facilities among mothers' post-CS and maternity healthcare providers in Kinondoni, Dar es salaam, Tanzania.

Methods: An exploratory qualitative study was employed where 18 in-depth interviews were conducted with thirteen (13) women who underwent CS within six weeks and five maternity healthcare providers. Participants were recruited purposeful from postnatal clinics, labor wards, and postnatal wards in two selected health facilities. Qualitative content analysis was used for data analysis.

Results: Three categories of non-medical reasons for cesarean section delivery emerged. These include (i) women related practices and preferences such as local believes and practices, non-conformity to Ante-natal Care (ANC) requirements and maternal request;, (ii) influence of healthcare providers such as opportunity for financial gain, limited competencies and unfamiliarity with guidelines and (iii) limited supportive health system related reasons which included lack of proper diagnostic technologies, limited training and supportive supervision and unfavorable working environment.

Conclusion: This study uncovered a triad of non-medical reasons for caesarean section delivery. It is prudent that efforts to reduce CS without proper medical indication be grounded into health promotion campaigns aiming to increase conformity to ANC requirements and proper education on the use of herbs. Unavoidably, addressing non-medical causes of CS will necessitate enhancing the working environment of healthcare facilities and ensuring adequate human resources for health. All of these endeavors necessitate the concerted and coordinated efforts of numerous stakeholders.