

Original Research Article

Cultural Practices and Maternal Health Outcomes in Taraba State

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Abstract: This study explores the influence of cultural practices on maternal health outcomes in Taraba State, Nigeria, aiming to understand how traditional birthing and postpartum care practices impact maternal mortality and morbidity rates. The study also investigates barriers to accessing modern maternal healthcare services due to cultural beliefs and practices. A systematic literature review was conducted, analyzing findings from various studies on traditional birth attendants (TBAs), contraceptive use, maternal mortality trends, and integrated maternal health programs. Key findings reveal a persistent reliance on traditional birthing practices facilitated by TBAs, who face significant challenges such as inadequate resources and inconsistent adherence to modern healthcare standards. Cultural and religious factors were identified as major determinants affecting the uptake of modern family planning methods. Integrated maternal, newborn, and child health (MNCH) programs showed promising results in reducing maternal mortality and improving health outcomes, highlighting the potential of comprehensive healthcare initiatives to overcome cultural barriers. Based on these findings, the study recommends continuous training and support for TBAs, community engagement and education on contraception, implementation of WHO-recommended maternal death reviews and surveillance, and the promotion of cultural competence among healthcare providers. These strategies aim to integrate beneficial cultural practices into modern maternal healthcare frameworks, enhancing maternal health outcomes while respecting and leveraging cultural diversity. By adopting these approaches, stakeholders can improve healthcare access, quality, and outcomes for mothers in Taraba State, fostering a sustainable and culturally sensitive healthcare system.

Keywords: Cultural Practices, Maternal Health, Family planning, Outcomes, Taraba State.

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INTRODUCTION

Maternal health remains a critical public health issue globally, with significant implications for the well-being of families and communities. The World Health Organization (WHO) defines maternal health as the health of women during pregnancy, childbirth, and the postpartum period (WHO, 2021). Despite global efforts to improve maternal health outcomes, Sub-Saharan Africa continues to bear the highest burden, accounting for approximately two-thirds of global maternal deaths (WHO, 2019). In Nigeria, the situation is particularly dire, with maternal mortality rates among the highest in the world. According to the Nigeria Demographic and Health Survey (NDHS, 2018), the maternal mortality ratio (MMR) is 512 per 100,000 live births, reflecting substantial regional disparities. Taraba State, located in

the northeastern part of Nigeria, exemplifies these disparities due to its unique socio-cultural landscape (NDHS, 2018).

Taraba State is home to over 80 ethnic groups, each with distinct cultural practices that influence health behaviors and outcomes (Facts.ng, 2017; National Population Commission, 2018). These cultural practices, deeply rooted in tradition, play a significant role in shaping maternal health outcomes. For instance, traditional birth practices, dietary restrictions during pregnancy, and the use of herbal remedies are common. Such practices can either positively or negatively impact maternal health, depending on their nature and the context in which they are practiced (Okeke *et al.*, 2019). Early marriage and female genital mutilation (FGM) are prevalent in some communities within Taraba State,

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contributing to adverse maternal health outcomes (Mohammed & Habiba, 2023). Early marriage often leads to early childbearing, increasing the risk of complications during pregnancy and childbirth. FGM, a harmful cultural practice, is associated with severe obstetric complications, including prolonged labor and postpartum hemorrhage (Oyefabi *et al.*, 2020).

Maternal health outcomes is believed to depend to a large extent on the accessibility and utilization of modern maternal healthcare services, which unfortunately in Taraba State, are further complicated by cultural beliefs and practices (Oludamilola, Sandy, & Tim, 2017). Many women rely on traditional birth attendants (TBAs) and traditional healers for prenatal and postnatal care, often delaying or avoiding hospital visits. This reliance is driven by factors such as the perceived high cost of hospital care, lack of cultural competence among healthcare providers, and fear of stigmatization (Adamu & Salihu, 2019). Given the profound influence of cultural practices on maternal health, there is a pressing need to research more on developing culturally sensitive health interventions that respect and integrate beneficial cultural practices while addressing harmful ones.

Statement of the Problem

Maternal mortality and morbidity in Taraba State are influenced by a complex interplay of socio-economic and cultural factors. Despite significant advancements in medical science and healthcare services, deeply entrenched cultural practices often hinder the adoption of modern maternal health practices. Taraba State, with its diverse ethnic composition, exhibits unique cultural dynamics that significantly impact maternal health outcomes (National Population Commission, 2018). Several specific maternal health issues are prevalent in Taraba State. Early marriage, a common practice in many communities, leads to early pregnancies that increase the risk of complications such as obstructed labor, pre-eclampsia, and eclampsia (Okonofua *et al.*, 2020). Female genital mutilation (FGM), another widespread cultural practice, is associated with severe obstetric complications including prolonged labor, postpartum hemorrhage, and increased susceptibility to infections (Oyefabi *et al.*, 2020).

Furthermore, traditional birthing practices, which often involve the use of unskilled traditional birth attendants (TBAs), contribute to high maternal morbidity and mortality rates. These attendants may lack the necessary skills to manage complications during childbirth, leading to delays in seeking emergency obstetric care (Adamu & Salihu, 2019). Dietary restrictions imposed during pregnancy, based on cultural beliefs, result in malnutrition and anemia, further exacerbating maternal health risks (Okeke *et al.*, 2019). The accessibility and utilization of modern maternal healthcare services are significantly hampered by cultural beliefs and practices. Many women in Taraba

State rely on TBAs and traditional healers for prenatal and postnatal care, often delaying or avoiding hospital visits due to mistrust of modern healthcare systems, perceived high costs, and fear of stigmatization (Adamu & Salihu, 2019). Additionally, the lack of culturally competent healthcare providers who can effectively communicate and engage with local communities further deters women from utilizing modern maternal health services (World Health Organization, 2019). To tackle these challenges, this paper addresses the critical gap in understanding the specific cultural practices that affect maternal health in Taraba State. By conducting a systematic literature review, this study seeks to provide evidence-based recommendations to mitigate the negative impacts of these cultural practices.

Objectives of the Study

The main objective of this study is to explore the influence of cultural practices on maternal health outcomes in Taraba State, Nigeria. To achieve this, the study focuses on the following specific objectives:

1. To identify and document the traditional birthing and postpartum care practices in Taraba State.
2. To assess the effects of these cultural practices on maternal health outcomes, including mortality and morbidity rates and overall maternal well-being.
3. To investigate the barriers to accessing modern maternal healthcare services due to cultural beliefs and practices.
4. To develop recommendations for integrating beneficial cultural practices into modern maternal healthcare and suggest policy interventions to improve maternal healthcare outcomes.

METHODS

This paper employs a systematic literature review methodology. A comprehensive search of academic databases, including PubMed, Google Scholar, and JSTOR, was conducted to identify relevant studies published between 2000 and 2023. Keywords such as "maternal health," "cultural practices," "Taraba State," and "Nigeria" were used. The selected studies were critically appraised and synthesized to identify key themes and patterns related to the research objectives. Systematic Literature Review (SLR) is a method used in empirical research which data for analysis solely depends on primary studies. The quality of an SLR outcome reflects on the evidence, strength and quality of the primary it utilized for analysis (Yang, *et al.*, 2021)

The sole aim of adopting the SLR method is to collate extant empirical findings on the research goal or the specific questions the study seek to answer. According to Bettany-Saltikov and McSherry (2016), SLR denotes summarizing literatures from researches that seek to address specific questions. This summary of literatures is carried out through identifying, selecting,

appraising and synthesizing substantial reputable outcomes relevant to the specific aim the research seeks to address. This study adopted the guidelines formulated by Centre for Reviews and Dissemination (CRD) of the University of York to establish the inclusion and exclusion criteria (CRD, 2009). The CRD guidelines for

eligibility criteria that this study adopted was due largely to its ability to avoid bias and caution for scientific procedures while selecting review papers. Inclusion and exclusion criteria for this study are summarized in Table 1.

Table 1: Inclusion and exclusion criteria

Inclusion Criteria	Exclusion Criteria
Studies focusing on maternal health outcomes among women in Taraba State, Nigeria.	Studies focusing on maternal health outcomes outside of Taraba State, Nigeria, or studies focusing on non-maternal health issues
Studies documenting traditional birthing and postpartum care practices, as well as studies examining the integration of traditional practices with modern maternal healthcare	Studies that do not address traditional birthing and postpartum care practices or the integration of traditional practices with modern maternal healthcare
Studies comparing maternal health outcomes in communities utilizing traditional practices versus those utilizing modern healthcare services	Studies without a clear comparison of maternal health outcomes related to traditional versus modern healthcare practices
Studies reporting on maternal mortality and morbidity rates, overall maternal well-being, barriers to accessing modern healthcare services, and the effectiveness of culturally sensitive health interventions	Studies that do not provide specific data on maternal mortality, morbidity, overall maternal well-being, or barriers to healthcare access
Empirical studies, including qualitative and quantitative research, published between 2000 and 2023	Non-empirical studies, opinion pieces, editorials, conference abstracts, and articles without peer review
Studies published in English	Studies published in languages other than English.
Studies specifically conducted in Taraba State, Nigeria, or any other Northern state, as long as the study have relevance for Taraba context	Studies conducted outside of Taraba State, Nigeria, or those that do not specify the region, or not relevant

Source: Authors' compilation, 2024

The narrative approach was adopted for data synthesis in this study. Narrative approach is a method where by evidence containing many studies (which depends largely on explaining and summarizing research outcomes using words and text) are reviewed. The narrative approach was preferred for use in this study because of its tendencies in statistical facts manipulation couple with the word-based technique it adopts to synthesise and discuss findings.

RESULTS

From data sources, 37 papers were extracted, which was reduced to 28 by the removal of duplicates. Then through the screening of abstracts and articles, 19

records were retained, from which 11 reports were excluded for not meeting the benchmark score in the Joanna Briggs Institute (JBI) checklist. The JBI instruments are designed to be study-specific and are presented as questions in a checklist (Barker, *et al.*, 2023). From the retained reports, 3 more reports were manually extracted as they were not identified through the data source search, either because their title or abstract did not feature significant search terms, or they were published in some unindexed journals, yet they are eligible for the study. Therefore, 11 reports were subjected to eligibility screening through which a total of 5 reports were accepted and retained for synthesis, as illustrated below.

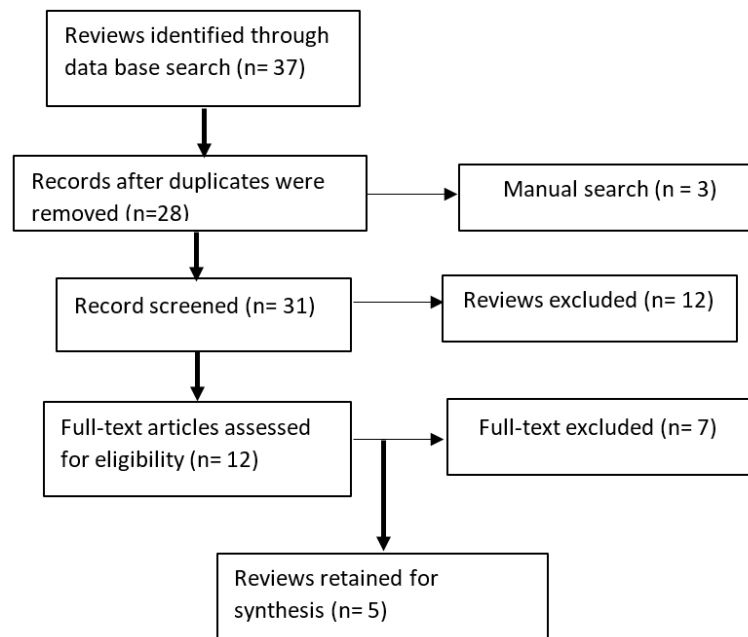


Fig. 1: PRISMA diagram

Table 2: Data from included papers

Author(s)	Aim	Setting	Participant	Data Collection	Result	Recommendations
Obadiah <i>et al.</i> , (2023)	to assess the knowledge and practice of Prevention of Mother-to-child Transmission of HIV (PMTCT) among (TBAs) in Taraba State	Taraba State	143 Government registered Traditional Birth Attendants (TBAs) residing and practicing in Taraba State	a researcher structured, questionnaire.	observed good infection prevention control measures. Majority of the TBAs (85.0%) lacked adequate water supply during deliveries	training and retraining of TBAs
Joel, <i>et al.</i> , (2022)	to investigate the usage of contraceptives among couples in Northern Taraba State, Nigeria	Northern Taraba state	women aged 15-49 years in the study area	Questionnaires, official documentation and observations	Religion, and culture, are among the factors that determine contraceptive use among couples.	Public enlightenment on contraception to start from antenatal clinics, to religious and community leaders
Okorie, <i>et al.</i> , (2024)	to apply statistical tools to research the maternal mortality ratio in Wukari, Taraba state, Nigeria	Wukari, Taraba state	women who experienced maternal-related issues in the study area	14 years medical records of General Hospital Wukari.	Trend for maternal mortality is decreasing.	conducting maternal death review, surveillance, and response using the technical guidance document recommended by WHO
Iorkosu, <i>et al.</i> , (2020)	Identify sociodemographic characteristics, traditional family planning methods, reasons for preference, and perceived effects of these methods.	Kwande Local Government Area (LGA) of Benue State	437 women of childbearing age in the study area	structured questionnaires and in-depth interviews	women of childbearing age mostly used herbal medicine as a family planning method, due to effectiveness and trust in the method, lack of side effects, low cost, and	advanced research to ascertain the effectiveness of traditional family planning methods for better outlook, policy-making, and implementation

					availability of the method	
Sally, <i>et al.</i> , (2013)	to describe the early results of an integrated maternal, newborn, and child health (MNCH) program in Northern Nigeria	Northern Nigeria	women who had given birth in the five years prior to the household surveys. (baseline survey 2009 - 2,129 women, follow-up 2011 - 2,310 women)	stratified random household surveys	The maternal and child health program in Northern Nigeria significantly improved anti-tetanus vaccination, early breastfeeding, newborn care, and reduced reliance on traditional birth attendants, resulting in notable declines in infant and child mortality	Ongoing improvements to the primary healthcare system should continue to support these interventions for sustained impact on maternal and child health

DISCUSSIONS

Traditional Birthing and Postpartum Care Practices

The persistence of traditional birthing practices in Taraba State, facilitated primarily by Traditional Birth Attendants (TBAs), reflects a complex interplay between cultural norms, healthcare access, and maternal health outcomes. Obadiah *et al.*, (2023) highlight that TBAs adhere closely to traditional methods despite facing challenges such as inadequate water supply during deliveries. This adherence underscores the cultural significance of these practices, providing communities with a sense of familiarity and comfort during childbirth. However, as noted, deficiencies in resources and infrastructure, such as inadequate supplies and training, can potentially compromise maternal health outcomes.

Joel *et al.*, (2022) and Iorkosu *et al.*, (2020) indirectly address the cultural influences on family planning practices, revealing a preference for traditional methods among couples in Northern Taraba State. These studies suggest that factors like perceived effectiveness, trust in traditional practices, and cultural norms significantly shape contraceptive use. Joel *et al.*, (2022) particularly emphasize how religious and cultural beliefs influence decisions related to contraception, often leading to a reliance on methods perceived as more aligned with cultural values.

This dual perspective—on traditional birthing practices and family planning—highlights several implications for maternal health outcomes in Taraba State:

1. **Cultural Comfort vs. Healthcare Challenges:** Traditional birthing practices provide cultural comfort but may lack adherence to modern healthcare standards due to resource limitations. TBAs, while valued for their cultural competence, often operate without adequate supplies and training, potentially compromising maternal health. Addressing these challenges

requires targeted interventions that enhance the capabilities of TBAs through training, improved infrastructure, and access to essential supplies.

2. **Impact on Maternal Health:** The reliance on traditional birthing practices and family planning methods influenced by cultural beliefs can impact maternal health outcomes. Practices like inadequate sterilization or lack of emergency preparedness among TBAs may contribute to higher maternal mortality and morbidity rates. Efforts to integrate modern healthcare practices while respecting cultural preferences are essential to improving maternal health outcomes.
3. **Policy and Intervention Strategies:** To mitigate these challenges, policies should focus on integrating beneficial aspects of traditional practices into modern maternal healthcare frameworks. This integration can be achieved through collaborative efforts involving healthcare providers, community leaders, and policymakers to ensure culturally sensitive healthcare delivery. Initiatives should also prioritize education and training for TBAs on infection prevention, safe delivery practices, and the recognition of obstetric emergencies.

Therefore, while traditional birthing practices and family planning methods offer cultural significance and community acceptance in Taraba State, addressing the associated healthcare challenges is critical for improving maternal health outcomes. By enhancing the capabilities of TBAs through training and infrastructure improvements and promoting culturally sensitive healthcare services, stakeholders can foster positive changes that benefit maternal health across the region.

Effects of Cultural Practices on Maternal Health Outcomes

The studies by Okorie *et al.*, (2024), Obadiah *et al.*, (2023), and Sally *et al.*, (2013) collectively provide a nuanced understanding of how cultural practices influence maternal health outcomes in Taraba State, Nigeria. Okorie *et al.*, (2024) offer promising insights by documenting a decrease in maternal mortality rates in Wukari, Taraba State, despite prevalent cultural practices. This suggests that effective health interventions can mitigate the negative impacts of traditional practices on maternal health. Such interventions likely include improved access to maternal healthcare services, enhanced medical infrastructure, and targeted educational programs aimed at both healthcare providers and local communities.

In contrast, Obadiah *et al.*, (2023) and Sally *et al.*, (2013) highlight persistent challenges. Obadiah *et al.*, (2023) underscore the resource limitations and variable adherence to modern healthcare standards among Traditional Birth Attendants (TBAs) in Taraba State. These challenges, such as inadequate water supply during deliveries and inconsistent infection prevention measures, reflect the enduring influence of cultural practices that may not always align with contemporary medical standards. Similarly, Sally *et al.*, (2013) indicate a gradual shift away from traditional birth attendants due to improved maternal, newborn, and child health (MNCH) programs, signaling ongoing efforts to reconcile cultural practices with modern healthcare initiatives.

These findings collectively underscore a complex landscape where cultural practices can both support and hinder maternal health outcomes. On one hand, cultural practices provide communities with familiar and trusted approaches to childbirth and family planning, enhancing acceptance and adherence. On the other hand, deficiencies in healthcare resources and adherence to modern medical protocols among TBAs pose significant challenges to maternal health. Addressing these challenges requires multifaceted strategies that leverage the strengths of traditional practices while implementing targeted interventions to improve healthcare access, infrastructure, and quality.

Barriers to Accessing Modern Maternal Healthcare Services

The studies by Joel *et al.*, (2022) and Sally *et al.*, (2013) provide critical insights into the cultural barriers affecting access to modern maternal healthcare services in Taraba State, Nigeria. Joel *et al.*, (2022) highlight how cultural and religious factors significantly influence contraceptive use among couples in Northern Taraba State, underscoring deep-seated cultural norms that shape healthcare decisions. This finding suggests that traditional beliefs and practices can pose substantial barriers to the adoption of modern maternal healthcare services, including family planning and antenatal care.

Moreover, Joel *et al.*, (2022) advocate for culturally sensitive approaches in healthcare delivery, emphasizing the involvement of community leaders and religious institutions. These stakeholders play pivotal roles in shaping community perceptions and trust in modern healthcare practices. By engaging with these influential figures, healthcare providers can foster acceptance and facilitate informed decision-making regarding maternal healthcare services. This approach not only respects cultural norms but also enhances the accessibility and utilization of essential healthcare services.

Sally *et al.*, (2013) complement these findings by illustrating how integrated Maternal, Newborn, and Child Health (MNCH) programs have successfully reduced reliance on Traditional Birth Attendants (TBAs) in Northern Nigeria. This shift signifies a pathway to overcoming cultural barriers through comprehensive healthcare initiatives that prioritize evidence-based practices and community engagement. By improving access to skilled birth attendants, promoting early prenatal care, and enhancing emergency obstetric services, MNCH programs demonstrate tangible improvements in maternal health outcomes while gradually shifting community perceptions towards modern healthcare practices.

Together, these studies highlight several strategies to address barriers to accessing modern maternal healthcare services in Taraba State, which include first cultural sensitivity: tailoring healthcare delivery to respect and accommodate cultural beliefs and practices is essential. This involves collaborating with community leaders and religious institutions to promote awareness, dispel misconceptions, and build trust in modern healthcare services. Second, community engagement: engaging with local communities through outreach programs, educational workshops, and participatory decision-making processes can empower individuals to make informed healthcare choices. This approach fosters a supportive environment for adopting modern maternal health practices. Thirdly, health system strengthening: investing in healthcare infrastructure, training healthcare providers in cultural competence, and ensuring equitable access to maternal healthcare services are critical components of overcoming barriers. This includes expanding healthcare facilities, improving transportation networks, and establishing referral systems for obstetric emergencies. Therefore, addressing cultural barriers to accessing modern maternal healthcare services requires a multifaceted approach that integrates cultural sensitivity, community engagement, and health system strengthening. By leveraging these strategies, stakeholders can promote equitable access to quality maternal healthcare, improve health outcomes, and advance maternal health rights in Taraba State and similar contexts globally.

Recommendations for Integrating Beneficial Cultural Practices

The studies by Obadiah *et al.*, (2023), Joel *et al.*, (2022), and Okorie *et al.*, (2024) offer valuable recommendations for integrating beneficial cultural practices into modern maternal healthcare in Taraba State, Nigeria. These recommendations are pivotal in fostering improved maternal health outcomes while respecting and incorporating local cultural norms and practices.

1. Continuous Training and Support for Traditional Birth Attendants (TBAs):

Obadiah *et al.*, (2023) emphasize the importance of ongoing training and support for TBAs to enhance infection prevention practices and overall maternal outcomes. This recommendation involves equipping TBAs with updated medical knowledge, skills in safe delivery practices, and effective communication with healthcare facilities. Continuous training programs can also address gaps in resource availability and promote adherence to modern healthcare standards among TBAs.

2. Community Engagement and Education on Modern Family Planning:

Joel *et al.*, (2022) highlight the critical role of community engagement and education in promoting modern family planning services. This recommendation underscores the need for comprehensive reproductive health education starting from antenatal clinics and extending to community forums led by trusted community leaders. By involving local influencers and religious authorities, healthcare providers can build trust, dispel myths, and increase acceptance of modern contraception methods tailored to cultural preferences.

3. Implementation of WHO-Recommended Maternal Death Reviews and Surveillance:

Okorie *et al.*, (2024) stress the implementation of WHO-recommended maternal death reviews and surveillance as essential policy interventions. This recommendation aims to systematically identify and address factors contributing to maternal mortality in Taraba State. By conducting regular reviews, healthcare systems can improve response mechanisms, enhance quality of care, and prevent avoidable maternal deaths. This approach also supports evidence-based policymaking and resource allocation towards maternal health initiatives.

CONCLUSION AND RECOMMENDATIONS

In examining the influence of cultural practices on maternal health outcomes in Taraba State, this study has illuminated a landscape where tradition and modern healthcare intersect. Traditional birthing practices, predominantly overseen by Traditional Birth Attendants (TBAs), provide cultural comfort but are beset by challenges such as inadequate resources and varying adherence to medical standards. Despite these

challenges, the resilience of cultural practices underscores their significance in local communities. Moreover, the study underscores how cultural and religious beliefs shape contraceptive use and healthcare-seeking behaviors, posing significant barriers to accessing modern maternal healthcare services. Overcoming these barriers necessitates culturally sensitive approaches that engage community leaders and religious institutions, fostering trust in modern healthcare practices and promoting informed decision-making among women.

From the findings of the study, the following recommendations are made;

1. **Enhancing TBA Capacities:** Continuous training programs for TBAs should be prioritized to improve infection prevention practices, safe delivery skills, and the recognition of obstetric emergencies. Strengthening TBAs' capabilities will enhance their role as cultural intermediaries while ensuring safer childbirth practices.
2. **Community Engagement and Education:** Establishing community-led health education initiatives, particularly through antenatal clinics and collaborative forums involving religious and community leaders, can effectively promote modern family planning methods. These efforts should focus on dispelling myths, addressing cultural beliefs, and increasing awareness about the benefits of contraceptives.
3. **Implementing Maternal Health Surveillance:** Adopting WHO-recommended maternal death reviews and surveillance mechanisms is crucial for monitoring and addressing maternal health outcomes effectively. This entails systematic data collection, analysis of maternal mortality trends, and prompt intervention strategies to mitigate risks and improve healthcare delivery.
4. **Promoting Cultural Competence in Healthcare:** Healthcare providers should undergo cultural competence training to better understand and respect local customs and practices. This will foster improved communication, trust, and collaboration with TBAs and community leaders, ultimately enhancing the integration of modern healthcare practices.

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