A Qualitative Assessment of Barriers and Enablers to Uptake and Adherence of Supplements for Pregnant Women in Haiti

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Objectives: Prenatal micronutrient supplementation (IFA or MMS) is an efficacious intervention utilized to improve maternal and birth outcomes, however challenges exist with establishing and maintaining high uptake and adherence to daily supplementation. The objective of this study was to characterize the existing barriers and enablers to uptake and adherence of supplements used during pregnancy in Haiti.

Methods: Qualitative research included in-depth interviews (IDI) with pregnant women or mothers who gave birth within the past 6 months (n = 14), influential family members of pregnant women or mothers (n = 10), and community leaders (n = 10); and 9 focus group discussions (FGDs) with health care providers. Transcripts were coded and thematically analyzed.

Results: Data suggest that general awareness for the need of supplementation during pregnancy is high. However, the majority of mothers and influential family members reported barriers to uptake and adherence to daily supplementation. Core themes surrounding barriers to uptake and adherence included (1) challenges accessing antenatal care and supplements associated with cost or distance to care, (2) existing community beliefs that delay ANC seeking behaviors, (3) side effects associated with the supplements, (4) undesirable characteristics of supplements including taste and smell, and (5) a fear of a big baby and caesarean section delivery. Enablers to uptake and adherence included (1) access to ANC services and supplements through free community based clinics, (2) support from family and friends, (3) high awareness of the supplements through existing community channels, (4) a high trust in the health care system, and (5) knowledge of the benefits of the supplement.

Conclusions: There is a need to develop behavior change strategies and tools that reduce current barriers while capitalizing on existing enablers that increase uptake and adherence of maternal supplementation in Haiti.

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