

## Locus of Control and Self-Esteem as Predictors of Maternal and Child Healthcare Services Utilization in Nigeria

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**Abstract :** Every day, 800 women die from conditions related to pregnancy and childbirth, resulting in an estimated 300,000 maternal deaths worldwide per year. Over 99 percent of all maternal deaths occur in developing countries, with more than half of them occurring in sub-Saharan Africa. Nigeria being the most populous nation in sub-Saharan Africa bears a significant burden of worsening maternal and child health outcomes with a maternal mortality rate of 917 per 100,000 live births and child mortality rate of 117 per 1,000 live births. While several studies have documented that financial barriers disproportionately discourage poor women from seeking needed maternal and child healthcare, other studies have indicated otherwise. Evidence shows that there are instances where health facilities with skilled healthcare providers exist, and yet maternal, and child health outcomes remain abysmally low, indicating the presence of non-cognitive and behavioural factors that may affect the utilization of healthcare services. This study investigated the influence of locus of control and self-esteem on utilization of maternal and child healthcare services in Nigeria. Specifically, it explored the differences in utilization of antenatal care, skilled birth care, postnatal care, and child vaccination by women having an internal and external locus of control and women having high and low self-esteem. We collected information on non-cognitive traits of 1411 randomly selected women, along with information on utilization of the various indicators of maternal and child healthcare. Estimating logistic regression models for various components of healthcare services utilization, we found that women's internal locus of control was a significant predictor of utilization of antenatal care, skilled birth care, and completion of child vaccination. We also found that having high self-esteem was a significant predictor of utilization of antenatal care, postnatal care, and completion of child vaccination after adjusting for other control variables. By improving our understanding of non-cognitive traits as possible barriers to maternal and child healthcare utilization, our findings offer important insights for enhancing participant engagement in intervention programs that are initiated to improve maternal and child health outcomes in low-and-middle-income countries.

**Keywords :** behavioural economics, health-seeking behaviour, locus of control and self-esteem, maternal and child healthcare, non-cognitive traits, and healthcare utilization

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