

INTRODUCTION

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Women are crucial to social and economic development. Their health and well being matters to themselves, to their families and communities. Motherhood is a positive and fulfilling experience for most women, but pregnancy and childbirth can also be associated with suffering, ill health and even death (*Bacci, 2005*).

Over half a million women are estimated to die annually during pregnancy, delivery and the post partum period. WHO estimates over 25 million cases of maternal morbidity occur every year world wide further more, it is estimated that over 98% of maternal deaths occur in developing countries (*WHO, 2000*).

In the national mortality study done in Egypt at 2000 the maternal mortality ratio was found to be 84 per 100,000 live births compared with 174 per 100,000 live birth at 1992 – 93 survey. Improving the quality of the provided maternal health services was recommended by the MOHP for further reduction (*MOHP, 2000a*)

In Egypt, MCH services are provided by different types of PHC facilities, including MCH centers and general UHCs in urban areas as well as combined rural health units (CRHU), rural health units (RHU) and integrated rural health units (IRHU) (*MOHP, 1999 a*).

MOHP (2002) identified certain elements of quality which are: Accessibility, effectiveness, essential provision of supplies and equipments, quality of client provider interaction, equity, acceptability, comprehensiveness of care, continuity of care and follow up and support to health care providers.