UNIVERSITY OF SWAZILAND
FACULTY OF HEALTH SCIENCES
DEPARTMENT OF MIDWIFERY SCIENCE
FINAL EXAMINATION: DECEMBER 2017

COURSE TITLE: COMMUNITY-BASED MIDWIFERY
COURSE CODE: MID/MWF 443
TIME ALLOCATED: 2 HOURS
MARKS ALLOCATED: 75

INSTRUCTIONS:

1. ANSWER ALL QUESTIONS

2. USE THE PROVIDED ANSWER BOOKLET FOR ALL YOUR ANSWERS

3. START ALL QUESTIONS IN A NEW PAGE

4. USE BULLETS FOR EACH POINT IN YOUR ANSWERS (DO NOT INVENT YOUR OWN NUMBERING)

5. CHECK THAT YOUR QUESTION PAPER HAS 3 PRINTED PAGES

6. DO NOT OPEN THE QUESTION PAPER UNTIL PERMISSION HAS BEEN GRANTED BY THE CHIEF INVIGILATOR
QUESTION 1

For each of the following questions, in your answer booklet, write clearly the letter that corresponds with the most appropriate answer e.g. 1. D

1.1 In which of the following STIs will a client NOT have a vaginal discharge?
   A. Gonorrhoea
   B. Candida
   C. Trichomonas
   D. Syphilis

1.2 Which of the following may occur as a result of forced marriage practices in Swazi societies?
   A. Still births
   B. Young women may be able to recognize the signs of pregnancy early
   C. Vaginal fistulas
   D. Both A and C

1.3 Which one of the following approaches is ideal for the management of STIs in HIV infection?
   A. Syndromic
   B. Secondary prophylaxis
   C. Diagnostic
   D. Symptomatic

1.4 Which one of the following is NOT a form of child abuse?
   A. Physical abuse
   B. Neglect
   C. Accidental injury or poisoning of the child
   D. Non-accidental injury
1.5 A 32 year old woman who is 10 weeks pregnant presents to the ANC unit for prenatal care. She has a history of treatment for syphilis 7 years ago. The results of serologic tests for syphilis are nonreactive. Which of the following statements is the most correct?
A. The baby is at high risk for congenital syphilis
B. The mother needs a lumbar puncture and a VDRL test for her CSF for neurosyphilis
C. The mother needs to be treated again for syphilis
D. The mother’s previous treatment for syphilis was effective

1.6 A HIV positive client comes to the STI clinic complaining about the presence of an ulcer around the genitals. Which one of the following statements refers to the difference between a chancroid ulcer and a syphilitic ulcer?
A. A syphilitic ulcer will be soft and painful with irregular shaped red margins, while a chancroid is painless with firm borders that feel like the tip of the nose
B. The client will report that he has had either of these before and therefore he is sure that it is not an STI
C. A chancroid ulcer will be soft and painful with irregular shaped red margins, while a syphilitic ulcer is painless with firm borders that feel like the tip of the nose
D. There will be no differences by clinical inspection, instead the health worker must order blood tests to be done in order to tell if it is a chancroid or syphilitic ulcer

1.7 Which of the following statements is/are NOT true about the treatment of STIs among HIV positive individuals?
A. Appropriate treatment of STIs at the first contact is an important public health measure.
B. Sexual partner(s) should be notified and treated, and patients should be advised against sexual intercourse until both the patient and the partner(s) are treated.
C. In the case of adolescent patients, encourage over the counter treatment because they may be afraid to come to the STI clinic in future, due to peer influence and self-esteem issues
D. All of the above
1.8 A 26 year old G1P0 presents to the clinic with purulent vaginal discharge and dysuria. While taking her history, you learn that she had unprotected sexual intercourse with a new partner a week ago. Which of the following is the most likely diagnosis for her condition?
A. Syphilis
B. Gonorrhea
C. Chlamydia
D. Genital warts

1.9 A 20 year old woman who reports unprotected sex with a new partner 2 weeks ago develops fever and left lower quadrant abdominal pain with onset in association with her menstrual period. What is the most probably diagnosis for her condition?
A. Chancroid
B. Infertility
C. Ectopic pregnancy
D. Pelvic inflammatory disease

1.10 What is the common complication of condition you picked in 1.8 above?
A. Cancer of the cervix
B. Infertility
C. Urethral stricture
D. Urinary tract infection

1.11 Menzi, a 17-year-old male adolescent, has come to the clinic complaining of pain in his genitals and sores on his penis. He has been experiencing these symptoms for about one week. Upon examination, you find multiple small, round ulcers on his penis and some swelling in the groin. Using the information provided, what is your diagnosis?
A. Syphilis
B. Genital warts
C. Herpes simplex
D. Chancroid
1.12 A 22 year old woman presents with a 2 cm ulcer on her labia majora. The lesion is painless and has a raised border. Which one of the following is the differential diagnosis of this lesion?
   A. *Chlamydia trachomatis* infection
   B. *Neisseria gonorrhoeae* infection
   C. Papilloma virus infection
   D. *Treponema pallidum* infection

1.13 Which of the following statements is/are true about power equity in sexual reproductive health?
   A. Giving children the opportunity to be part of the decision making process in all matters pertaining to their health
   B. The woman’s husband being the sole decision maker in the family determines what services the woman should be given
   C. Involves empowering and promoting the social, economic and political exclusion of all human beings, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status.
   D. Both A and C

1.14 Which of the following constitute(s) gender-based violence?
   A. Sexual coercion
   B. Deprivation to liberty
   C. Physical aggression
   D. All of the above

1.15 In which one of the following instances is a woman said to be suffering from primary infertility?
   A. She is unable to have her menstrual period
   B. She is unable to carry a pregnancy to term
   C. She has spontaneous miscarriages, even if she has had one previous live birth
   D. She experiences pain during sexual intercourse

1.16 The main goal of community-based midwifery is to:
   A. Treat minor illnesses in the community
   B. Treat and refer major illnesses for women and their children
   C. Prevent maternal and neonatal deaths
   D. All of the above
Questions 1.17 to 1.19 relate to the preamble below:
As a community-based midwife, you will be counselling families during each home visit. Therefore, it is important to understand the process of behaviour change before you start visiting and counselling the family. For each of the cases below, state the stage of behaviour change that the woman is in (1 mark) and state how would attempt to make the family adopt the behaviour mentioned in each situation (2 marks):

Case 1
1.17 A woman has heard that delivering at a health facility is safer than delivering at home, and her husband and mother-in-law also are talking about it. She is thinking about saving money for a health facility birth because she thinks it will be best for her and her child. [3]

Case 2:
1.18 A G2P1 says she prefers formula feeds because she gave it to her previous child and she never encountered any problems with it. She has never heard about exclusive feeding. [3]

Case 3:
1.19 A woman has delivered a small-for-gestational age (SGA) baby. She was told by the community-based midwife that feeding SGA babies every 2 hours is important to make them stay healthy and she is trying to do this. She is worried that waking the baby up to feed her is making the baby irritable and making the baby takes a long time to fall asleep. [3]

[Total: 25 marks]
QUESTION 2

2.1 State the three (3) sustainable development goals which are directly related to maternal, neonatal and child health (MNCH). [3]

2.2 Explain the goals of formulating a community diagnosis when a community-based midwife is conducting a community health assessment. [5]

2.3 Community-based midwifery practice is based on the principle of primary health care, which also underpins the public health roles of community-based midwives.

2.3.1 Define primary health care. [2]

2.3.2 State the public health roles of midwives in any community they work in. [5]

2.3.3 Explain the challenges faced by community-based midwives as they carry-out their duties in the communities they work in. [5]

2.4 Explain why it is important for community-based midwives to be knowledgeable about concepts of epidemiology as they carry out their duties in the communities they live in. [5]

[Total: 25 marks]

QUESTION 3

During one of your community-based midwifery internship deployments, you meet Beke, an 18-year-old, unemployed girl living at Didapol, one of the rural areas in the Shiselweni region. She dropped out of school at second grade because her father got retrenched from Maloma Colliery Mine and only had money to pay school fees for her older brother. She recently found love with a 35 year old man in her neighbourhood who has repeatedly asked her to sleep with him. She has always refused stating that she was not yet ready to have sex, but he then beats her, leaving her with sores all over her body, and forces her to have sex with him. He drinks a lot and fights with other community members when he gets drunk. Beke has noted that he frequently goes to
Manzini and spends many nights there. She thinks he probably sleeps with other women while in Manzini and could have contracted HIV/AIDS. She is afraid neither to tell her parents nor to report the case to the local police or the local community-based midwife. She is confused and does not know what to do.

3.1 State the type(s) of gender-based violence (GBV) Beke has experienced? Justify your answer. [4]

3.2 Mention four (4) factors that contributed to the GBV in Beke’s case. [4]

3.3 Describe five (5) barriers faced by Beke in reporting the GBV. [10]

3.4 State the possible risks and consequences Beke is likely to suffer as a result of the type(s) of GBV identified in 1.1 above. [2]

3.5 Discuss what you would do to prevent cases of GBV in Beke’s community. [5]

[Total: 25 marks]