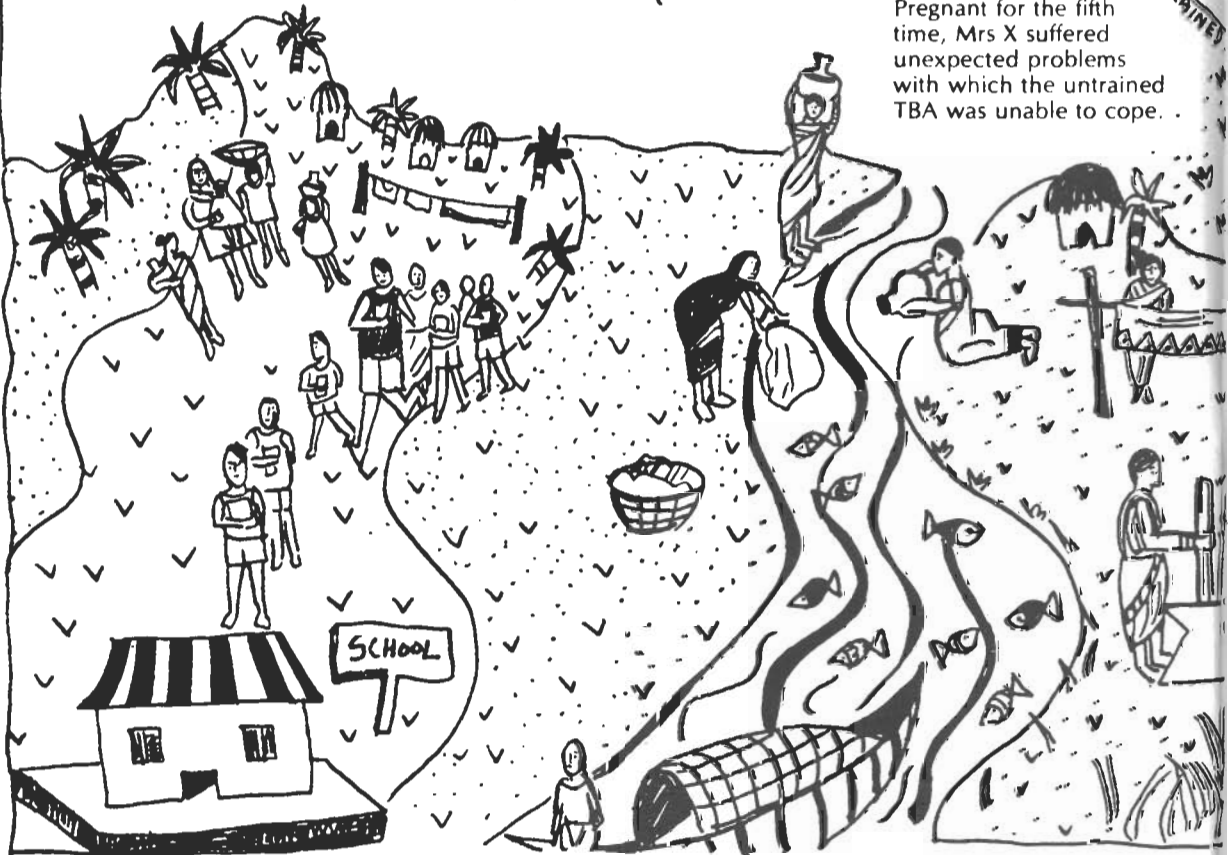


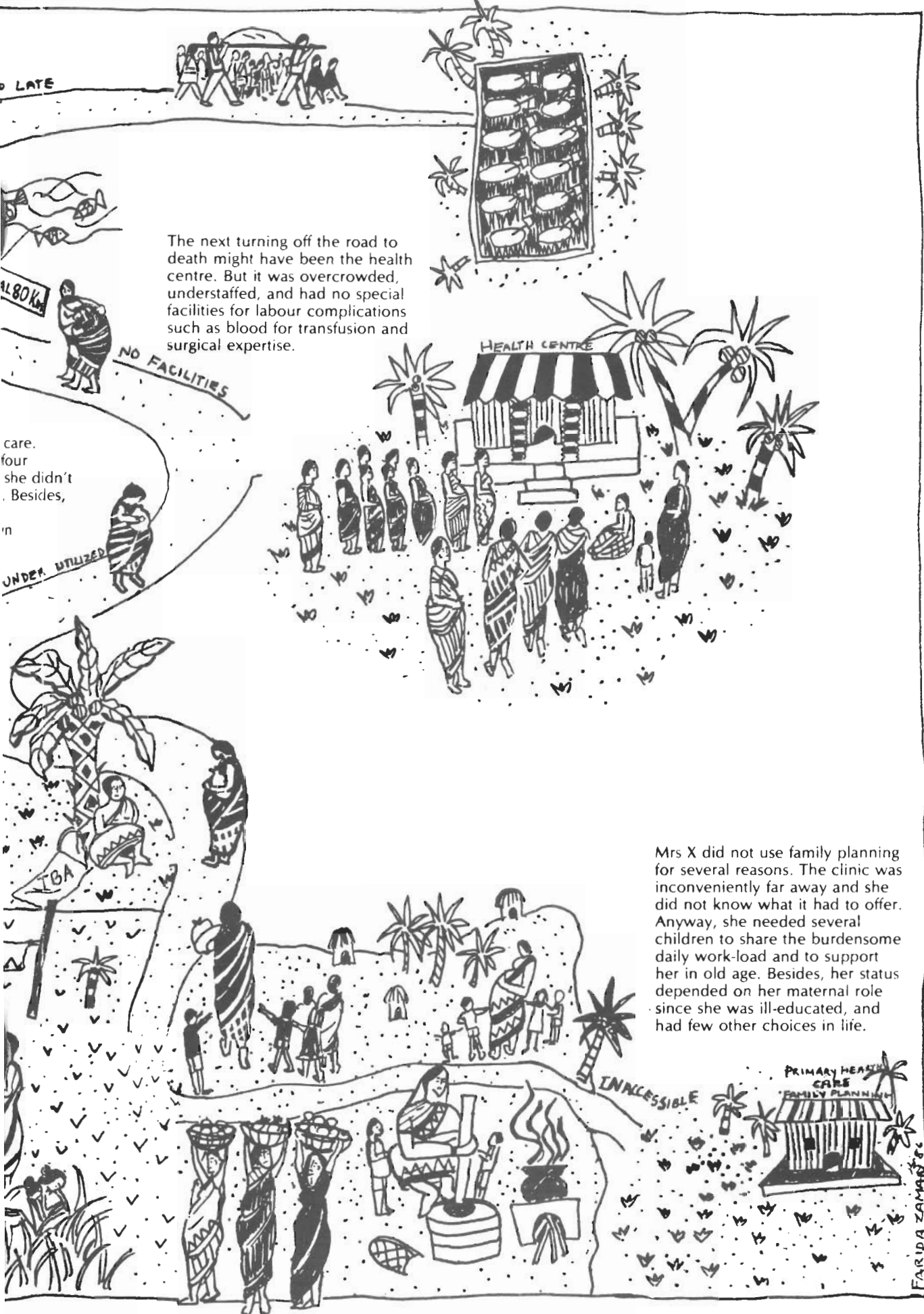
The district hospital held out the only hope of safe delivery for Mrs X. But it was a long, long way over rough terrain. She had to rely on chance for a lift. There was no way of calling for help. She arrived in a desperate state, too late for successful treatment.



Prenatal care might have foreseen the problem, but Mrs X had not received prenatal care. Having already produced children without incident, she did not understand the need for prenatal care. She was very busy and tended to consider her own needs last. No one else in her family considered she had special needs during pregnancy.



Pregnant for the fifth time, Mrs X suffered unexpected problems with which the untrained TBA was unable to cope.



The next turning off the road to death might have been the health centre. But it was overcrowded, understaffed, and had no special facilities for labour complications such as blood for transfusion and surgical expertise.

Mrs X did not use family planning for several reasons. The clinic was inconveniently far away and she did not know what it had to offer. Anyway, she needed several children to share the burdensome daily work-load and to support her in old age. Besides, her status depended on her maternal role since she was ill-educated, and had few other choices in life.

FARIDA ZAMAR