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Culturally Congruent Continuous Labour Support Framework for Women in Nigeria

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Background

Worldwide, women share a common need and desire for continuous therapeutic support in labour (Mahdi & Habib, 2010). Historically and transculturally, it is quite commonplace for childbirth to take place at home, with trusted family members and friends providing care and support for the labouring woman. This family-based and traditional support system for childbirth is valued by women and, is also associated with a positive childbirth experience. However, with the shift of childbirth from home to the hospital, this valued traditional childbirth practice has been subsumed by modernity and technological interventions (Hodnett et al., 2013).

A Nigerian woman dies every 13 minutes from pregnancy or childbirth-related causes, and two-thirds of all women in Nigeria deliver babies outside of health facilities without the chance of being attended to by medically skilled attendants (Africa Population and Health Research Centre, 2017; Wekesah, & Izugbara 2017; WHO, 2012). Ethics, culture and religion form the basis for the diversity of factors affecting utilisation of maternal health services in Africa (Say & Raine, 2007). Socio-cultural and ethno-religious factors rank among other reasons for under-utilisation of Maternal and Child Health services in Nigeria. The unfriendly attitudes of health workers, abuse, maltreatment and more importantly the lack of continuous labour support (CLS) during childbirth, contributes to poor utilisation of most public health facilities in Nigeria (Olusegun et al, 2012; Harrison, 2009; & UNICEF 2007).

The rate of maternal mortality can only be reduced when maternity services are rendered in an atmosphere that is culturally acceptable to women in labour. A significant number of research studies have revealed the desire of Nigerian women to have CLS from their social networks (Oboro et al., 2011; Dim, Ikeme, Ezegwui, & Nwagha, 2011; Morhason-Bello et al., 2008). However, this kind of practice is rare in Nigeria, especially in public health facilities. Implementation of CLS in public hospitals requires a standardised framework to influence policy, neither of which exists in Nigeria. Different CLS frameworks are used in the western world, but none has been found fit for the divergent cultural landscape of Nigeria.

Purpose:

This paper describes the methodological approach employed in the development of a culturally congruent CLS framework for women in the South West region of Nigeria

Methods:

A concurrent mixed method approach was used for this two-phase study. Phase 1 involved the assessment of the perceptions, attitudes and preferences of the pregnant women, nurse-midwives and health policy-makers to CLS from a person of the woman's choice, in public health facilities.

In Phase 2 of the study, culturally congruent Continuous Labour Support framework for women in south-west Nigeria was developed using the Model Development Approach by Walker and Avant (2011). Concepts were identified, described and developed through synthesis of data from questionnaires, the focus group and individual interviews of all stakeholders. Concept classification, description and validation was achieved through the six vantage points of surveying activity listed by Dickoff et al, (1968).

Results:

Findings shows CLS as alien in public health facilities with no standard guideline and policy for it implementation; but all groups of study participants had positive perceptions and attitudes towards CLS from person(s) of the woman's choice within her social network. A total number of 29 concepts and related concepts were identified, developed and described to form context in the CLS framework

Conclusion:

The developed framework fulfills the yearning of some women for a culturally congruent maternity care which minimises socio-cultural hindrances to the utilisation of maternal and child health services, increases skilled birth attendance and reduces the menace of maternal mortality and morbidity. It also forms a guideline for the implementation of CLS from a person of the woman's choice in public health facilities in south west, Nigeria and other parts of the country with a similar cultural frame.

Title:

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References:

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Abstract Summary:

Family-based and traditional support system during childbirth is a valued trans-cultural practice worldwide. However, this practice has been subsumed by technological interventions leading to poor utilisation of health services especially in Africa. This paper describe the development of a Culturally Congruent Continuous Labour Support framework for women in Nigeria