

Title:

Continuous Labour Support in Public Health Facilities in Nigeria: Midwives' Perception and Attitude

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Session Title:

Midwifery in South Africa

Slot:

A 15: Saturday, 28 October 2017: 2:15 PM-3:00 PM

Scheduled Time:

2:35 PM

Keywords:

Continuous Labour Support, Midwives Perception and Attitude and Public Health Facility

References:

Airhihenbuwa, C. O., Ford, C. L., & Iwelunmor, J. I. (2014). Why culture matters in health interventions: Lessons from HIV/AIDS stigma and NCDs. *Health Education & Behavior: The Official Publication of the Society for Public Health Education*, 41(1), 78-84. Doi: 10.1177/1090198113487199 [doi]

Hodnett, E. D., Gates, S., Hofmeyr, G. J., & Sakala, C. (2012). Continuous support for women during childbirth. *The Cochrane Database of Systematic Reviews*, 10, CD003766. doi:10.1002/14651858.CD003766.pub4

Hodnett, E. D., Gates, S., Hofmeyr, G. J., Sakala, C., & Weston, J. (2013). Continuous support for women during childbirth. *Cochrane Database Syst Rev*, 7(7)

Otley, H. (2013). Fear of childbirth: Understanding the causes, impact and treatment. *British Journal of Midwifery*, 19(4).

Abstract Summary:

A qualitative, exploratory and descriptive study that explored the Nurse/Midwives perceptions and attitudes to Continuous Labour Support (CLS) in seven selected public health facilities in the South-West region of Nigeria

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learners will be able to understand the concept of Continuous Labour Support in Africa context	Introduction of CLS concept , the perception and attitude of the Nurse/Midwives to CLS in public health facilities in Nigeria
The learners will be able to recognize the need, benefits/ challenges and enablers to CLS introduction and implementation in Africa setting from Nurse/ midwives perspectives	Explanation of the study finding regarding the need, benefits/ challenges and enablers to CLS introduction and implementation in Africa setting from Nurse/ midwives perspectives

Abstract Text:

Background

Pregnancy and childbirth are regarded as normal physiological events, but, it is usually associated with great emotional, psychological and cultural significance for women and their families (Otle, 2013). The childbirth experience is influenced by several factors that could have an impact and result to either an unsatisfactory or a satisfactory childbirth experience. These factors include a sense of security, perceived control, experiences of prior deliveries, involvement in decision-making, the nature of organisational care and quality of support during labour (Dencker, Taft, Bergqvist & Lilja 2010; Hodnett, Gates, Hofmeyr & Salaka, 2012).

Traditionally in all cultures across the globe, women usually gave birth surrounded by family members and with the support of other women, but with the movement of birth to the hospital, this valued tradition was lost and women became subject to and dependent on medical technology and hospital routines (Hodnett, Gates, Hofmeyr & Salaka, 2013). Several studies have documented the re-emergence and contribution of Continuous Labour Support (CLS) to women satisfactory childbirth experience mostly in developed countries, but CLS implementation and practice has remained the exception rather than the rule in most developing countries, particularly Nigeria (Sapkota, Kobayashi, Kakehashi, Baral, & Yoshida, 2012; Hodnett et al, 2013).

Aims

The study explored the Nurse/Midwives perceptions and attitudes to Continuous Labour Support (CLS) public health facilities in the South-West region of Nigeria and also explored Nurse/Midwives opinion to CLS by a preferred person or persons from labouring women's social networks using the Airhihenbuwa (1989; 2014) PEN-3 cultural model.

Method

A qualitative, exploratory and descriptive design was adopted for the study. The study population were Nurse/Midwives (n= 45) selected purposefully in seven public health facilities in Ondo state, Nigeria. Focus group discussions were conducted until data saturation occurred. Data was analysed through Tesch's method of thematic analysis yielding themes and categories.

Results

The study findings reveal only occasional/discretionary practice of CLS in the public health facilities, lack of policy and guideline for its implementation was also reported. The Nurse/Midwives expressed a positive disposition to CLS introduction and use women preferred person or persons from their social networks based on beneficial effect to all stakeholders. However, CLS implementation in public health facilities in Nigeria will depend largely on complete overhauling existing infrastructure with adequate measures to other challenges identified in the study.

Linking Evidence to Action

There is need to ensure culturally congruent maternity care in all sector in Nigeria. The study's findings highlighted the need, benefit/ challenges as well as the enablers to CLS practice in public health facilities in Nigeria. CLS introduction and implementation in resource limited and high mortality country like Nigeria may promote the therapeutic presence and family involvement in women care during childbirth. It may also increase utilisation and skilled birth attendance in public health facilities, hence contribute not only to culturally inclined satisfactory childbirth experience but to the reduction of preventable mortality associated with pregnancy and childbirth.

