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A Study of Awareness and Performance of Midwives about Physiologic Childbirth in Public Hospitals of Ahvaz City in 2016

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Abstract

Introduction: To promote normal childbirth the care during childbirth should be on evidence-based care. Eevidence-based care practices promote physiological birth. This study aimed at examining midwives' awareness and performance about physiological childbirth in Ahvaz public maternity services.

Methods: In this descriptive study, 128 midwives were selected from the maternity units of Ahvaz hospitals using census sampling. The researcher-made questionnaire was used for self-reporting of awareness and performance of midwives.

Results: Most of the midwives (86.7%) had a bachelor degree, and 1-7 year work experience (64.1%). The results of this study showed that the midwives of the Ahvaz hospitals had relatively good awareness of physiologic labor items; however, the performance of them was not as ideal as their awareness.

Conclusions: Iranian midwives are informed about evidence-based practice in childbirth, which indicates that attempts to promote physiologic childbirth have been useful. However, appropriate interventions are necessary to promote the use of evidence-based practice in clinical practice.

INTRODUCTION

The higher rates of normal childbirths are linked to beliefs about childbirth and implementation of evidence-based practice [1]. The World Health Organization (WHO) recommends implementation of evidence-based practice within guidelines and policies for labor and childbirth classifying practices [2]. Review of different studies indicates that intrapartum-care strategies which promote normal physiologic vaginal birth are associated with a lower rate of cesarean rate [3]. The Lamaze also support six healthy birth practices, which represent evidence-based practice and are gold standards for care during labor and childbirth [4]. In the past three decades, the safe motherhood initiatives have done much to improve outcomes for women and their babies in Iran. However, this has led that childbirth is considered as a medical and technical problem with unnecessary medical interventions in the country [6]. In recent years, there has been attempts to promote physiological childbirth in Iran and natural childbirth without unnecessary interventions is encouraged. However, the compatibility of the performances of the care providers with the "national guidelines and delivery guide" was not desirable and 10% of them had negative attitudes towards the national care guideline [7]. This study aimed to explore the awareness and performance of midwives about physiologic childbirth in Ahvaz City.

METHODS

In this descriptive study, 128 midwives were selected from

the maternity units of Ahvaz hospitals using the census sampling method. Data were collected in Ahvaz maternity hospitals from June to July 2016. A researcher-made questionnaire was used for self-reporting of awareness and performance of midwives. This questionnaire consists of two sections: demographic information and midwife awareness and performance assessment inventory. The questionnaire included 15 awareness-related items ('Yes', 'No', 'I don't know') and 15 Likert-based performance-related items ('Always', 'Most often', 'Sometimes', 'Rarely', 'Never'). The scores lower than the mean were considered poor, and scores higher were categorized as average, good, and very good. The minimum and maximum scores for awareness were 0 and 40, respectively. Therefore, scores 0-19, 20-26, 27-33, and 34-40 were considered poor, average, good, and very good, respectively. The minimum and maximum scores for performance items were 15 and 75, respectively. Scores lower than 44, and between 45-55, 56-65, and 66-75 were considered poor, average, good, and very good, respectively. To determine the validity of the questionnaire, the qualitative content validity was used and the questionnaire was given to 12 midwives. Reliability of the instrument was computed using the Cronbach's alpha (0.85). Data were analyzed by the SPSS 23 software.

RESULTS

Most of the midwives were in the 31-40 age group and mean age was 32.3 years. Majority of them (86.7%) had a bachelor degree and 1-7 year work experience (64.1%) and were also married (53.3%). only 24% of the midwives had permanent job (Table 1).

Table 1: Characteristics of the Midwives (Percentage)

Age, y	**%**
22-30	39.8
31-40	47.7
41-50	12.5
Education	
MSc	6.8
BSc	86.7
Associate degree	6.5
Work experience	
1-7	64.1
8-15	25
16-23	7.8
23<	3.1
Marital status	
Single	46.7
Married	53.3
Employment status	
Contractual job	76.3
Permanent job	23.7

Table 2: Awareness of Midwives in Ahvaz Regarding Physiologic Labor Items

Awareness of midwives in Ahvaz regarding physiologic labor items	**Mean**
Avoiding unnecessary interventions such as starting IV fluid, shave, enema, and	
monitoring fetal heart sound fetus, episiotomy, ... ((When there is no indication	1.96
Skin-to-skin contact of mother-neonate after birth	1.95
Helping mothers to initiate breastfeeding	1.95
Freedom of mother in taking up their desirable (position during labor (lying or walking	1.91
Allow mothers to eat and drink during labor	1.91
Concealing stressful medical equipment from mothers	1.07
Providing support for mothers	1.03

Table 3: Performance of Midwives in Ahvaz Regarding Physiologic Labor Items

Performance items	**Mean**
Let move freely during labor	4.84
Let mothers have skin-to-skin contact with their .neonates after birth	4.84
Provide mothers with breastfeeding support after .birth	4.84
.Encourage mothers to eat and drink during labor	4.78
Avoid unnecessary interventions	3.85
Conceal stressful medical equipment from moth-.ers	3.85
Provide support for mothers	3.84

According to the results, awareness of the midwives of physiologic labor items were very good (73.4%), good (23.4%) and average (3.2%). The highest awareness scores were obtained in placement in desirable position during labor and childbirth, avoiding unnecessary interventions, and providing skin-to-skin contact of mother-neonate and breastfeeding support. The lowest awareness scores were obtained in concealing stressful equipment, and providing them with required support during labor (Table 2).

The performance of physiologic labor was good (53.1%), very good (43%) and average (3.9%). The highest performance scores were obtained in letting mothers adopt their desirable position and have free movement during labor, and providing mothers with skin-to-skin contact with their neonates and breastfeeding support. The lowest performance scores were obtained avoiding unnecessary interventions, concealing stressful equipment and providing mothers with required support during labor (Table 3).

The Pearson correlation test showed a significant positive correlation between awareness and performance ($P = 0.001$). Additionally, there was a positive correlation between awareness and performance with age and work experience ($P = 0.01$). The results of the liner regression showed that midwives' performance increased 0.562 for each unit of measure of their work experience ($P < 0.001$).

DISCUSSION

This study showed that the midwives working in the hospitals of Ahvaz city had relatively good awareness of physiologic labor items, such as avoiding unnecessary procedures (e.g., administrating IV fluids, shaving, injecting enema, and monitoring fetal heart sound), performing routine episiotomy (when there is no indication), supporting mothers, providing skin-to-skin contact of mother-neonate after birth, helping mothers initiate breastfeeding, and letting mothers adopt their desirable position during labor (lying or walking) and childbirth. The knowledge score of 57.7% of caregivers was leveled as average and 10% of them had negative attitudes towards the national care guideline in another study in Tehran [7]. Iranian student midwives also had an average knowledge about physiologic childbirth [8]. The maternity quality care is defined as an optimal care, which minimizes the risk of error and harm by supporting physiology of childbirth [9]. Evidence-based care practices promote physiological birth [10] According to Lamaz, six practices are supported by research evidence that study the benefits and risks of maternity care practices [4]. In the past decade, the Ministry of Health and Medical Education (2006) have attempted to put standards of evidence-based practice in guidelines by publishing "National guidelines for Normal Childbirth" [11]. This booklet is revised three times and disseminated in different hospitals. There were also some attempts for promoting physiological childbirth by inviting a birth educator from abroad and training and informing midwifery lecturers and educators about physiologic childbirth. This led to run workshops for educating midwives about physiological childbirth all over the country.

According to the findings, the performance of midwives in Ahvaz was not as ideal as their awareness of physiologic labor items. This also is supported by evidence from the studies from Iran. Although the evidence-based care is included in the "National guidelines for Normal Childbirth", it has not yet adequately been implemented [6, 7, 12]. This is because that there are variations worldwide as to the place of care, level of care, sophistication of services available and professional position of caregivers for normal childbirth [2]. Care in normal birth can vary from a supportive care at hospital or at home, to childbirth in hospital with different interventions [13]. Iranian midwives are educated and trained according to the international standards, however in the past three decades the medical model of care is dominant in maternity services and the physiological event of childbirth has changed into an interventionist practice in Iran. Consequently, their role is downplayed and they are not in a responsible position in care of low risk women during labor and childbirth and cannot practice independently [6]. Indeed, national investment in midwifery care can improve the quality of care [5] which can contribute to promoting of physiologic childbirth by reduction of unnecessary interventions. This will change women's childbirth experiences to a pleasant experience.

This was a small descriptive study in which all midwives from public hospitals in Ahvaz with different management systems participated. The description of midwives' performances was obtained according to self-reporting, which could be the study limitation.

This study shows that Iranian midwives are informed about evidence-based practice in childbirth; however, appropriate interventions are necessary to promote the use of evidence-based practice in clinical practice. Iranian midwives need to be put in the responsible position for managing normal and physiological childbirth.

ETHICAL CONSIDERATION

This study is extracted from Mozhgan Kord MSc thesis. This study was approved by ethics committee of Shahid Beheshti University of Medical Sciences with registration code IR.SBMU.PHNM.1394.184.

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CONFLICT OF INTEREST

Authors declare that they do not have no competing interests.

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AUTHOR CONTRIBUTION

FP, MK and PK contributed to the study design. MK collected, analysed and interpreted the data. FP interpreted the data and drafted the manuscript. PA contributed to the analysis and interpretation of data. MH was the statistic advisor. All authors have approved the final manuscript.

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