Positive childbirth experience: a qualitative Study

CURRENT STATUS: UNDER REVIEW

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DOI: 10.21203/rs.2.20374/v1

SUBJECT AREAS
Maternal & Fetal Medicine

KEYWORDS
childbirth, qualitative, research, experience
Abstract

Objective Women gain essential experiences during the labour process that the quality of these experiences impacts on the health of the mother and her child and the mother-child relationship. The aim of this study was to explore the meaning of a positive childbirth experience as expressed by women who had given birth in Iran. This is a qualitative study on conducted on a sample of 10 women aged 20-38 with positive childbirth experience. Data were collected using semi-structured interviews were conducted during 72 hours to two months after childbirth. The sampling process was purposeful. Content analysis method was used for data analysis.

Results Interviews with the participants were analyzed, and conceptual codes were extracted and then coded into two themes and five subthemes. The theme includes: control and empowerment and subtheme includes preparation, coping, support, self-efficacy and self-esteem. Positive childbirth experiences play a crucial role in women's empowerment and increase fertility rates and decrease cesarean delivery. Many factors play an important role in making childbirth experience that health care systems must consider during pregnancy and childbirth in their policies and guidelines.

Introduction

Women gain essential experiences during the labour process that remain with them throughout their lives. The quality of these experiences impacts on the health of the mother and her child, the mother-child relationship, as well as the spouse. (1, 2) The experience of childbirth is multifaceted, so it is difficult to describe and explain. Various variables have been implicated in evaluations of childbirth experiences, including midwife support, length of labour, pain, expectations of labour, involvement and participation Labour, using invasive methods such as episiotomies, forceps, emergency
cesarean Sect. (3)

A systematic study by Hosseini et al. has shown that the prevalence of childbirth experiences varies across communities and is influenced by a variety of factors including individual factors, interpersonal factors, and unexpected medical problems for mother and child(4).

Consequences of a positive experience of childbirth include: increased self-esteem, self-efficacy, skills, maternal and infant attachment, and better acceptance of the maternal role(5, 6).

The negative experience of childbirth leads to the choice of cesarean section or abortion for subsequent pregnancy. It also plays a role in fertility and pregnancy intervals so that negative experience will reduce fertility and increase the distance to subsequent pregnancy(7)

Given the importance of creating a positive experience, the aim of this study was to explore the meaning of a positive childbirth experience as expressed by women who had given birth in Iran.

Methods

This is a qualitative study on conducted on a sample of 10 women aged 20-38 with positive childbirth experience. The criteria included in the study were: women with uncomplicated vaginal delivery, cephalic presentation, and had healthy infants. Data were collected at May, Jun 2018 in Abbas Abad health center of Mazandaran University of Medical Sciences, Iran. The sampling process was purposeful. face- to- face semi-structured interviews were conducted during 72 hours to two months after childbirth in privacy room at Abbas Abad Health Center. The interviews lasted approximately 35 to 60 minutes. At first, general questions were asked to begin the interview and were guided by the participants' responses to the interview process. Initial questions include:
“How did your perception childbirth?”

“What abilities did you get with natural childbirth?”

The researcher has continued sampling so far that he has not come up with a new idea.

Ethical approval was given by the research Council and the Ethics Committee of Shahroud University of Medical Sciences, and Permission was also obtained from Mazandaran University of Medical Sciences. Participant was voluntary for the women. Before the time interview, researcher explained the purpose of the study, the confidentiality of their responses, and the possibility for them to withdraw from study at any time.

Content analysis method was used for data analysis. This method created knowledge, new insight, facts and practical guidance(8).

In this study, clear and hidden concepts were identified. The concepts and codes are summarized according to the participants’ descriptions. Then they are classified according to differences or similarities and the themes are extracted(9).

To validate the data, long-term engagement, insight into data collection, review and review by the supervisor, and continuous comparison of data were used. Dependency indicates the consistency and reliability of the data. For this purpose, additional comments from colleagues and handwriting review by participants were used. The Confer ability of the findings was determined by reporting to two experts and obtaining the same result. The transferability of the study was provided by a rich description of the data(10, 11).

Results

A total of ten women aged 20 to 40 years participated in the study. (table1)

| Table1: The demographic characteristics of the participants |
Interviews with the participants were analyzed, and conceptual codes were extracted and then coded into two themes and five subthemes. The theme includes: control and empowerment and subtheme includes preparation, coping, support, self-efficacy and self-esteem (Table 2).

Table 2: Theme and subtheme identified from women with pleasant childbirth experience

| theme          | subtheme      |
|----------------|---------------|
| Control        | preparation   |
|                | coping        |
|                | support       |
| empowerment    | self-efficacy |
|                | self-esteem   |

Participants in this study stated that preparation (mentally and physically) plays a significant role in the experience of childbirth. This preparation is created by knowing about the process of childbirth, pregnancy and childbirth was planned and familiarity with the environment. Participants in the study also stated that they obtained information from a variety of sources including the media, childbirth preparation classes, parental, and others important.
"I liked the natural delivery, and I was searching the internet a lot, I felt I could have a normal delivery." (p 2)

Another participant stated, "Birth preparation class training was very helpful to me."

"My mother always told me I had four natural births. How can you not? What they said was more tolerable ". (p 4)

"I had received information from those who had given birth, saying is not hurting, Cesarean section hurts over time." (p7)

Previous familiarity with the delivery environment plays a vital role in the satisfaction of childbirth. Women familiarity with the delivery environment before childbirth gives rise to realistic expectations.

The women in this study stated that:
" I was already familiar with the hospital. I didn't expect much." (p8)

Some participants stated that pregnancy and childbirth should be planned to be enjoyable.
" The guest that is coming into your life but always with you, before you invite it you have to prepare the field, not without planning, support it when you get it." (p5)

Coping

The study found that women who used cognitive (distraction and beliefs) and functional (relaxation techniques) approaches to childbirth were better able to control childbirth.
"My baby was the best thing; thinking of my baby would get me out of pain." (p8)

"It was always in my mind during the birth that I was hugging my baby; it feels so good." (p8)

" during the labour and birth, I thought to God that it would give more power." (p1)

"The pain is the pain with the result. You're not hopeless, you know a baby wants to come." (p5)

"I did a number of exercises during the pain, which made my cervix open faster. "(p10)

support

In the study, most participants stated that when they come to attention, they could better control their delivery. This attention includes: care provider, husband and relatives support.

Appropriate care provider communication can support women well (perception women's needs, Informing women about the progress of childbirth, adequate physical care)

In this study, participants stated that:
"I would ask my midwife How am I now? They said you were making progress; I hope you do "(p1)

"I wanted to inform me. Well, knowing what stage you are in and how much you have left,
very helpful” (p5)
"A staff must understand her illness, some have the ability to give birth, some cannot." (p3)
"When they listened to a baby’s heart several times in one hour, I thought to myself that they work really well." (p4)
In this study, the participants also stated that the support and presence of husband and relatives play a useful role in their childbirth experience.
"My husband was very supportive of me during all the pregnancy moments; she was with me at delivery and after delivery." (p7)

Empowerment

self-esteem

In this study, women with positive childbirth experiences find out their ability and ability to cope, their responsibility to their family and their independence, which indicates an increase in their empowerment in their lives.

participants stated that:
"When I had normal childbirth, I felt I was strong enough to give birth." (p6)
"With childbirth your duty becomes heavier, you take more responsibility, You'll be responsible for someone else." (p9)
"Previously, I wanted to do one thing, I asked ten people, no now, I was empowered with childbirth, I thought I should keep somebody else "(p2)

self-efficacy

In this study also found that women with a positive experience of childbirth, high self-efficacy, a better understanding of the maternal role, tend to continue fertility in subsequent vaginal births.

participants stated that:
"Natural childbirth is really 'love, you don't understand what it means to be a mother until you have labour pain"(p3)
"If I want to give birth again, I still want to have a normal delivery." (p4)

Discussion

In this study, it was found that factors controlling childbirth have an essential role in childbirth satisfaction. These include preparation, coping, and support. in this study found that following a pleasant childbirth, increase their self-efficacy and self-esteem, thus increasing their ability to improve their health.
Mental preparation is created with familiarity of the delivery environment, awareness of childbirth and pregnancy was planned. Physical preparation is created through relaxation training through various practical techniques in childbirth preparation classes; in fact, these methods create realistic expectations for women. Realistic expectations lead to a positive attitude towards childbirth. Factors influencing realistic expectations, including books, magazines, the Internet, television; receiving information from a care provider, friends, and colleagues (12)

Some studies have found that modeling mothers is important in creating realistic expectations; according to Bandura's social learning, experiences are transferred from mother to child(13).

In this study, participants stated that they used different cognitive and practical approaches to coping and control to childbirth. This is supported by findings from a qualitative studies (1, 2, 14-16). Therefore, the provider must identify women resources during pregnancy to deal with childbirth and strengthen these resources.

Care provider support include of: attitude, encouragement, guidance, sympathy, listening and providing information(17).

Effective communication with the women is one way of supporting and controlling childbirth(18).

This is supported by finding from other studies.(2, 12, 15, 16, 19-22)

Due to the importance of communication in understanding pleasant delivery, the care provider must acquire sufficient scientific and practical skills in the field of health care. Husband support and others are essential factors in perception pleasant childbirth, in several studies, the role of husband support in understanding childbirth experience has been suggested(16, 19-21, 23).

In this regard, Care provider should first consult with pregnant women to identify someone
to be present at the childbirth process and invite them to participate in the delivery process. Then assess the attitudes and provide the necessary training to reinforce and modify their attitudes to childbirth.

Empowerment is a process through which people will have more control over decisions, lifestyles, and activities that affect their health.

Self-efficacy and self-esteem are one of the dimensions of empowerment. One of the critical implications of this study is to increase self-efficacy. Self-efficacy is one's belief in one's ability to perform a particular behavior successfully, which can influence one's behavior, thinking pattern, and reaction(24). Women with high self-efficacy respond well to critical situations and events and solve problems effectively.

High self-efficacy promotes social health including the ability to cope with social challenges, the ability to manage interpersonal disadvantages, and the ability to establish and maintain interpersonal relationships, and promote emotional health, including the belief in being able to control and manage stress.

Another necessary consequence of a pleasant perception of childbirth is self-esteem. The findings of this study are in line with Shahoei et al study that perceiving the experience of childbirth positively increases patience, responsibility, self-esteem, self-efficacy, independence, better mother-infant relationship, promotion quality of life and empower women(14)

Women's empowerment makes women more involved in taking care of themselves and their baby, better controlling and managing other life challenges

Positive childbirth experiences play a crucial role in women's empowerment and increase fertility rates and decrease cesarean delivery. On the other hand, childbirth experiences indicate the quality of health care. Many factors play an important role in making experiences enjoyable that health care systems must consider during pregnancy and
childbirth in their policies and guidelines, and with adequate training and measures of physical and mental fitness for women to meet realistic expectations, Better birth control, reducing women's fears and anxiety and, on the other hand, providing services to women should identify the needs and resources of women during pregnancy and take measures to strengthen women's resources so that they can play an effective role in promoting positive women's experiences.

**Limitation**

The limitation of this study was that the data was gathered from women referred to Abbas Abad health center of Mazandaran University of Medical Sciences that may not be a representative of all Iranian women.

**Abbreviations**

P  
participant

**Declarations**

**Authors’ contributions**

MHT, AK, ZM contributed in the start of the study, co-ordination, participated in the acquisition of data and drafted the manuscript. ZS, SK, and MM participated in the acquisition of data and analysis and drafting the manuscript. All authors read and approved the final manuscript.

**Competing interests**

The authors declare that they have no competing interests.

**Acknowledgments**

The present study was supported by Shahroud University of medical sciences as a PhD Thesis. We hereby acknowledge the research deputy for grant No 97161.
Availability of data and materials

The datasets used and/or analyzed during the current study are available from the corresponding author on reasonable request.

Consent for publication

Not applicable.

Ethics approval and consent to participate

Ethical approval was given by the research Council and the Ethics Committee of Shahroud University of Medical Sciences, and Permission was also obtained from Mazandaran University of Medical Sciences. Informed written consent to participate was obtained from all women. women participate in the study voluntarily and name of the women were not mentioned in the scripts.

Funding

This study was supported by Shahroud University of Medical Sciences.

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