Normative Beliefs and Values Shape Mother’s Care Seeking Behaviours for Skilled Birth Attendance (SBA) During Birthing in Africa: A Scoping Review Protocol

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Protocol

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Abstract

Background: Skilled birth attendance (SBA) during delivery has been associated with improved maternal health outcome. However, low utilisation of SBA during childbirth has continued in many developing countries including Zambia. An understanding of the beliefs and values and how mothers are influenced by relational normative motivations is critical in understanding some “hidden” barriers and facilitators to utilisation of SBA in health facilities.

Methods: A scoping review of normative beliefs and values shaping care seeking behaviours for Skilled Birth Attendance by mothers in Africa will be conducted. Google scholar, PubMed, EBSCOhost, SCOPUS, Embase and WEB of Science will be searched for articles that meet the eligibility criteria. The primary search will include peer-reviewed articles. Further searches will be made on Research gate, including grey literature from university websites for dissertations and theses. We will also search reference lists for relevant articles and studies. Keyword searches will be used to identify articles. Two independent reviewers will begin screening for eligible titles, abstracts and full articles with a third reviewer to help resolve any disputes. During title and abstract screening, duplicates will be removed. Study selection will conform to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses Extension for Scoping Reviews (PRISMA-ScR) guidelines, and the Mixed Method Appraisal Tool will determine the quality of included studies. Content analysis will be used to present the narrative.

Discussion: Understanding how individual mother’s health seeking behaviours for SBA and those close to them are influenced by their beliefs and values is critical to informing health systems on the possible “hidden” barriers and facilitators to utilisation of SBA in public health facilities. The review will complement evidence base on normative beliefs and values shaping care seeking behaviours for Skilled Birth Attendance by mothers in Africa.

Background

Maternal and infant mortality and morbidity in developing countries in large part could be averted if all women successfully utilised care from skilled birth attendants for childbirth[1]. Utilisation and access to quality facility-based services by skilled birth attendants (SBAs) during pregnancy, delivery and post-delivery has been associated with improved maternal health outcomes [1, 2]. However, low utilisation of care by SBAs during childbirth has continued in many developing countries, including Zambia.

Existing evidence reveals that individual and contextual factors, including health system factors, influence mothers’ care seeking behaviours for skilled birth attendance in health facilities during childbirth[3, 4]. Health system factors that hinder care seeking for childbirth have been reported to include limited availability of healthcare workers, lack of equipment and supplies [5, 6], and the attitude [7] and practices of health care workers, such as disrespectful and abusive care [8]. Individual level factors, such as the mother’s age [9], marital status [10], level of education, economic status of the household [11, 12], and cultural and religious beliefs [13-16] have also been reported as negative predictors to care seeking.
behaviours of mothers. The location of services available is another important contextual factor hindering utilisation of SBA for childbirth from the health facilities [17].

Some studies have reported that although some mothers are willing to seek care for childbirth [18] and would prefer to give birth in a health centre with a skilled health care provider [19], their perceptions and understanding of the care provided by skilled birth attendants during childbirth [20, 21] influences their intention and decision to seek care for childbirth. This becomes one of the contributing factors to the existing disparities to access and utilisation of care from SBAs during childbirth.

The growing need for health systems to ensure better maternal and infant health outcomes for populations requires continued exploration of possible hidden barriers using diverse approaches that inform policy. An understanding of the beliefs and values and how individual mothers are influenced by relational normative motivations is critical to informing public health policy on the such “hidden” barriers and facilitators to utilisation of SBA in public health facilities in Zambia. Down and colleagues (2018) argue that the care of mothers during childbirth should be designed to fulfil women’s personal and socio-cultural beliefs and expectations [22]. Therefore, studies focusing on mothers’ normative values and beliefs and how these shape their decisions to seek care from a skilled birth attendant during childbirth need to be explored.

Normative ethics is concerned with the individual’s view of what is morally right and wrong [23]. However, the extent of the evidence on mothers’ normative values and beliefs and how these values may be shaping their decisions and motivation to access care by a skilled birth attendant is limited. Therefore, we aim to map and document existing literature on normative beliefs and values that shape care seeking behaviours for SBA of mothers in Africa. We hope that the findings from this review will highlight gaps in the existing literature and form a basis for refining research questions for future interventions.

**Methods**

**Search Strategy**

A systematic search, selection, and synthesis of existing literature will be used through a scoping review methodology in order to answer the research question. Scoping reviews are a comprehensive and rigorous method aimed at rapidly mapping key concepts underpinning a research area. The review will be guided by the Arksey and O’Malley [24] framework which entails identification of the research question, identification of relevant studies, selection of studies, charting the data, and collating, summarising, and reporting the results. We will also appraise the quality of the included studies as recommended by Levac et al [25].

**Identifying the research question**
Our research question is: What is the evidence of normative beliefs and values that shape care seeking behaviours for SBA by mothers in Africa?

We have used the Population—Concept—Context (PCC) approach recommended by the Joanna Briggs Institute for scoping reviews [26] to construct a clear and meaningful research question for a scoping review (Table 1.1).

| Population | Mothers, women |
|------------|----------------|
| Concept    | normative beliefs and values about SBA |
| Context    | The context for this study will be Africa |

**Identifying relevant studies**

We will conduct a comprehensive search of relevant articles from the following electronic databases with articles published between January 2000 and March 2020; Google scholar, PubMed, EBSCOhost, SCOPUS, Embase and WEB of Science. Further searches will be made on Research gate, including grey literature from university websites for dissertations and theses. We will also search reference lists for relevant articles and studies. Review articles will be excluded. Medical Subject Headings (MeSH) terms that will be included during the search for relevant articles are: perception, expectation, experience, mothers, women, normative belief, culture, value, norm, tradition, utilization, utilisation, uptake, maternity, delivery, childbirth, sub-Sahara, Africa developing and low- and middle-income country. We will also use Boolean terms, AND and OR to separate the keywords. The search strategy will be adapted for each database. For each search conducted, we will document in detail the date of search, the search engine, and the number of publications retrieved.

**Pilot Study**

A pilot search was conducted in PUBMed and google scholar to determine the feasibility of the research question and search terms using a scoping review method. A preliminary search of articles was done on 28th April and the output of the pilot search is shown on Table 2.
| Date Searched | Search Engine   | Keywords                                                                                                                                                                                                 | Articles found in the pilot |
|--------------|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| 22/04/2020   | PUBMED         | (perception* OR expectation* OR experience*) AND (mothers* OR women) AND (normative belief * belief* OR culture* OR value* OR norm* OR tradition*) AND (utilization OR utilization OR uptake) AND (maternity OR delivery OR childbirth) AND (sub-sahara* OR africa OR low and middle income country OR developing countries) | 321                         |
| 22/04/2020   | Web of Science | (perception* OR expectation* OR experience*) AND (mothers* OR women) AND (normative belief * belief* OR culture* OR value* OR norm* OR tradition*) AND (utilization OR utilization OR uptake) AND (maternity OR delivery OR childbirth) AND (sub-sahara* OR africa OR low and middle income country OR developing countries) | 34                          |
| 22/04/2020   | Google Scholar | (perception* OR expectation* OR experience*) AND (mothers* OR women) AND (normative belief * belief* OR culture* OR value* OR norm* OR tradition*) AND (utilization OR utilization OR uptake) AND (maternity OR delivery OR childbirth) AND (sub-sahara* OR africa OR low and middle income country OR developing countries) | 4,650                       |
Selection of studies

Identification of appropriate and relevant articles will be guided by selection criteria.

Inclusion criteria

To be included, articles will have to meet the following characteristics:

- Evidence on beliefs and values surrounding childbirth
- Evidence on perceptions towards facility delivery or skilled health care providers
- Articles published between 2000 and March 2020
- Articles in English

Exclusion criteria

We will exclude the following articles;

- Studies not in English
- Studies with no evidence of mother’s values, beliefs, or norms surrounding childbirth
- Studies not focused on childbirth or delivery services
- Studies not freely available in full text

All the articles retrieved from the databases will be screened for eligibility through the following stages. In the first stage, the principle investigator (PI) will screen the all the titles for eligibility, and articles that meet the eligibility criteria will be exported to endnote, a referencing software (version 7) used to store and organize citation information. All the titles that are not eligible will be excluded and all the duplicates deleted. In the second stage, the PI and a trained reviewer will independently (in parallel) screen the abstracts from the retrieved titles to include only eligible articles. In the last stage, the PI and another reviewer shall read through the full articles for eligibility. At every stage, any differences in the outputs will be resolved through a discussion and if needed a decision will be derived by inviting a third screener. The Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines [27] will be used to report the screening process. (See Fig 1).

Charting the data

A data extraction form will be used that includes the following variables: author(s) and date of publication, country of publication, aims or purpose of the study, study design, key findings, and conclusion or recommendations. The charting form will be pre-tested by the reviewers on five to ten randomly selected studies to determine consistency[28]. This will be done by ensuring that the reviewers independently conduct a trial data extraction and later discuss as a team to ensure that the approach is in line with the objective. To improve the applicability, consistency, and quality of the chart, a continued
review through an iterative process, which involves reading and re-reading the summaries, will be ensured. This process will entail continuous editing of the extraction form throughout the duration of the study.

**Collating, summarising, and reporting the results**

All studies that meet the inclusion criteria will be analysed using both descriptive quantitative summaries (including figures) and qualitative thematic content analysis. Data relating to the beliefs and values of mothers or women and their social networks, in regards to childbirth by skilled health care providers in Africa, will be coded using NVivo version 12 (ref?). Emerging themes will be identified, coded, and categorised into major themes. The resulting themes will then be synthesised, summarised, and discussed in relation to the objective of the study and its implications on ethical practice, policy, and future research.

**Quality appraisal**

To determine the methodological quality of the studies to be included, we will use the mixed method appraisal tool (MMAT) version 2018 [29]. The MMAT tool will help us determine the quality of the studies by examining the aptness of the aim of the study and the adequacy of the methodology, study design, participant recruitment, data collection, data analysis, presentation of findings, and authors’ discussions and conclusions. A scoring matrix in the MMAT tool will be used to independently appraise the quality of the studies, and the results from the scoring will be used to determine the overall quality of the article.

**Discussion**

Efforts to identify drivers to non-use of SBA among women should consider different and additional dimensions including normative and ethical inquiry [30-32]. Understanding the beliefs and values of mothers and others close to them, and how individual mothers are influenced by these beliefs and values, is critical to informing public health systems on the possible “hidden” barriers and facilitators to utilisation of SBA in public health facilities. The findings from this review may inform public health and clinical practice, and guide the design of strategies that respond to the beliefs and values of mothers, in efforts to achieve Universal Health Coverage for maternal health care interventions in developing countries.

This scoping review may have limitations worth noting. Firstly, the basic characteristic to scoping review methodology lacks additional quality assessment or critical appraisal of included articles, which will limit our ability to identify evidence gaps. Secondly, the exclusion of non-English studies from the review due to a lack of capacity to screen articles not available in English may limit the generalizability of the findings to non-English populations.
This scoping review will be critical to uncover the breadth and extent of research that exists in field. The findings of the review may be of interest to researchers by highlighting research gaps that may need further investigation. Further, implementers and policymakers involved in interventions aimed at improving SBA may be informed by the evidence from the review. Finally, the review of findings from studies in Africa will be of interest to informing health systems on some demand side barriers and facilitators to utilisation of SBA in public health facilities.

**Abbreviations**

SBA: Skilled Birth Attendance; PCC: Population, Concept, Context

**Declarations**

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**Authors’ contributions**

CJ developed the first draft and subsequent revisions; AAH helped edit and revise all versions. All authors approved the final version.

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**Availability of data and materials**

Further details of the protocol are available from the corresponding author on reasonable request.

**Ethics approval and consent to participate**

Not applicable.

**Consent for publication**
Competing interests

The authors declare that they have no competing interest

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**Figures**

**Figure 1**

PRISMA flow diagram of study selection process