

Disrespect and abuse during facility-based childbirth in Pokhara metropolitan city

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ABSTRACT

Introduction: Respectful maternity care is the universal right of every childbearing woman, which promotes the practices that recognize women's preferences and women's and newborns' needs. The objective of the study was to assess disrespect and abuse during facility-based childbirth in Pokhara. **Methods:** Postnatal mothers having vaginal institutional delivery were included in the study. Non-probability purposive sampling technique was done to select 231 samples. Face to face interview technique with structured interview schedule was used. Descriptive and inferential statistics were used for data analysis. **Results:** Most (88.3%) of the mothers were between the age of 20 and 34 years with the mean age of 25.39±4.799 years. More than half of them had spontaneous vaginal delivery with episiotomy and (87%) of mothers had no any complications during childbirth. The overall disrespect and abuse during facility-based childbirth was (70.1%) and only (29.9%) of the postnatal mothers received respectful and non-abusive care. Regarding types of disrespect and abuse, (34.6%) of them were suffered from physical abuse, (68%) received non-consented care, (22.5%) of them received non-confidential and non-dignified care, (1.3%) experienced discrimination based on specific attributes and (26%) suffered from abandonment or neglect of care. There was no significant association between the prevalence of disrespect and abuse with socio-demographic and obstetric characteristics of the mothers. The association was found with place of delivery. **Conclusion:** It is concluded that near to three fourth of the postnatal mothers suffer from disrespect and abuse during facility based child birth in Pokhara. Thus, to increase respectful and non-abusive care during facility based childbirth, practice of respectful maternity care should be promoted including development of clinical guidelines and protocols.

Keywords: Childbirth, Disrespect and Abuse, Facility, Pokhara

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INTRODUCTION

The White Ribbon Alliance is a worldwide movement for safe motherhood that believes that respectful maternity care is the universal right of every childbearing woman, considers disrespect and abuse during maternity care as a violation of women's basic human rights.¹ Respectful maternity care is an approach centered on the individual, based on principles of ethics and respect for human rights, and promotes practices that recognize women's preferences and women's and newborns' needs.²

Bowser and Hill 2010,³ in a landscape analysis, categorized disrespectful and abusive care at childbirth into seven types: physical abuse, non-consented care, non-confidential care, non-dignified care, discrimination, abandonment of care and detention in facilities. Bohren et al.⁴ in their systematic review further classified mistreatment of women during facility-based childbirth into seven domains: physical abuse, sexual abuse, verbal abuse, stigma and discrimination, failure to meet professional standard of care, poor rapport be-

tween women and providers, and health system conditions and restraints.

A study conducted in Nigeria among 446 mixed rural and urban women showed that 98 percent of women reported at least one kind of abuse and disrespect during their last childbirth. The provision of non-consented services and physical abuse were the most common types of disrespectful and abusive care during facility-based childbirth.⁵ Similarly study conducted in Tanzania, evidence from direct observations of client-provider interactions during labor and delivery confirmed high rates of some disrespectful and abusive behaviors.⁶ The most frequently mentioned form of disrespect and abuse in the open-ended comments were abandonment and neglect.⁷

The extent of disrespect and abuse in facility-based childbirth has not been systematically documented or even well defined. Women's health and human rights experts believe that disrespect and abuse in childbirth represents an important barrier to utilization of skilled birth care and constitutes a common cause of suffering and violations of human rights of women.^{8,9} It also damages the trust between the woman and healthcare providers and effects on decision making regarding future delivery in a health facility including quality of care.^{10,11} So, this study aimed to determine the prevalence and types of disrespect and abuse postnatal mothers experienced during facility based childbirth in Pokhara.

METHODS

The descriptive cross sectional study design was used to determine the prevalence of disrespect and abuse during facility-based childbirth in Pokhara Metropolitan City. It has 33 numbers of wards. Pokhara Metropolitan City office runs their mobile clinic of maternal and child health services from ward number one to seventeen. Most of the wards belongs to ward number one to seventeen provide service once a month in respective day like ward number one in first day of month. Immunization clinic of ward number eighteen to thirty-three are run by health center of respective wards on 4th, 5th, 6th and 7th of every month. The postnatal mothers who were attending Maternal and Child Health Clinic of respective ward for any purpose within 45 days of delivery were the study population. Sample size was determined by using the Cochran's formula, $n = (Z\alpha^2pq)/d^2$. Information regarding number of postnatal mothers visiting the clinic per day from each ward of the Pokhara Metropolitan City was obtained. The average number of postnatal mothers visiting the clinic per day was 50. Non-probability purposive sampling technique

was used to collect the sample of 231 postnatal mothers. Seven postnatal mothers were taken from each ward. The postnatal mothers having vaginal institutional delivery were included in the study. Women having cesarean section for their child birth and home delivery were excluded.

A structured interview schedule was constructed by the researcher through extensive literature review. The first part included the questions about socio-demographic characteristics and the second part included the questions related to obstetrics characteristics. The third part included the questions related to disrespect and abuse. The level of disrespect and abuse was measured on the basis of seven performance standards (categories of disrespect and abuse) and their respective verification criteria developed by the Maternal and Child Health Integrated Program (MCHIP) as part of their respectful maternity care tool kit.² The performance standards were physical abuse (7 items), non-consented care (12 items), non-confidential care (4 items), non-dignified care (4 items), discrimination based on specific attributes (5 items), abandonment/neglect of care (3 items) and detention in facilities (1 item). A total of 36 verification criteria of disrespect and abuse were used in the study. Verification criteria were counted within their respective categories of disrespect and abuse. The verification criteria were dichotomized responses, "Yes" or "No", to objectively identify reported events of disrespect and abuse. For categories of disrespect and abuse with one or more than one verification criterion, a woman was labeled as "disrespected and abused in the respective category" if she reported "Yes" to at least one of the verification criteria during childbirth. If a mother was identified as having faced disrespected and abused in at least one of the seven categories, she was considered "disrespected and abused".

Data was collected after getting ethical approval from Institutional Review Committee of Institute of Medicine and Office of Pokhara Metropolitan. The IRC approval reference number is 420(6-11) e²/075/76. Purpose of the study was explained to the respondents. An informed written consent was obtained from each subject prior to data collection. The respondents were assured voluntary participation. Confidentiality of the information was maintained by not disclosing the information and using the obtained information for the study purpose only. The data was collected from 14th May to June 13th, 2019 through face to face interview technique.

The collected data was edited, organized, coded and analyzed using computer package with SPSS (Statistical Package for Social Science) software version 16. Data was

analyzed by using descriptive and inferential statistics. Descriptive statistics i.e., frequency, percentage, mean, range, standard deviation was computed for the study variables. Inferential statistics i.e., Chi square and Fisher's exact test were used to find out the association. P value of <0.05 was considered significant.

RESULTS

Two hundred and thirty-one postnatal mothers attending Maternal and Child Health Clinic were included in the study. Most (88.3%) of the mothers were between the age of 20 and 34 years. The mean age was 25.39 ± 4.799 years ranging from 16 to 40 years. Regarding ethnicity, 45.5% of the mothers were Janajati and more than one third (33.8%) were Brahmin/Chhetri. All of them were literate. More than half (68.8%) were home maker. Regarding occupation of their husbands, more than half were involved in private job. More than half (64.9%) of the mother's family income was adequate for more than one year with surplus. Majority (72.3%) of the mothers delivered on government hospital and most (86.1%) of them would recommend the facilities for their family and friends (Table 1). More than half of the mothers belong to multiparous, 56.7% had spontaneous vaginal delivery with episiotomy whereas 7.4% had assisted vaginal delivery (vacuum). Most (90.5%) of the mother's new born baby was born without complications and majority (87%) of the mothers had no any complications during childbirth (Table 2).

In this study, 65.4% of the postnatal mothers were not physically abused whereas 34.6% of them were physically abused during facility based child birth. Likewise, on the aspects of the non-consented care, 68% of the mothers received non-consented care and 32% received consented care. Similarly, in non-confidential care more than three fourth (77.5%) of the mothers had received confidential care whereas, 22.5% received non-confidential care. Likewise, 77.5% of the mothers were treated with dignity and respect, only 22.5% were not treated with dignity and respect. Regarding discrimination based on specific attributes most (98.7%) of the mothers were not discriminated. Similarly, 74% of the mothers were never left without care and attention and only 26% were left without care and attention. Cent percent of mothers were never detained or confined against her will. The overall disrespect and abuse during facility-based childbirth was 70.1% and only 29.9% of the postnatal mothers received respectful non-abusive care (Table 3). There was not significant association between the prevalence of disrespect and abuse

during facility-based childbirth with socio-demographic and obstetric characteristics of the mothers but significant association was found with place of delivery (Table 4).

Table 1: Background information of the mothers (n=231)

Characteristics	Frequency	Percentage
Age group in years		
Less than 20 years	21	9.1
20-34 years	204	88.3
35 years and above	6	2.6
Mean SD: 25.39 4.799 years, Range:16-40 years		
Ethnicity		
Brahmin/Chhetri	78	33.7
Janajati	105	45.5
Dalit	37	16.0
Marginalized group	11	4.8
Types of family		
Nuclear	81	35.1
Joint	150	64.9
Educational level		
Primary level	21	9.1
Secondary level	80	34.6
Higher secondary level	97	42.0
Bachelor level and above	33	14.3
Occupational status of women		
Agriculture	5	2.3
Home maker	159	68.8
Business	41	17.7
Service	25	10.8
Labour	1	0.4
Husband Occupation		
Government job	30	13.0
Private job	128	55.4
Jobless	13	5.6
Foreign employment	60	26.0
Status of the family income		
Income enough only for less than six months	4	1.7
Income enough for less than one year	77	33.4
Income enough for one year and surplus.	150	64.9
Place of delivery		
Government hospital	167	72.3
Private hospital	64	27.7
Recommendations		
Yes	199	86.1
No	32	13.9

Table 2: Obstetric characteristics of the mothers (n=231)

Characteristics	Frequency	Percentage
Parity		
Primiparous	114	49.4
Multiparous	117	50.6
Mode of present delivery		
Spontaneous Vaginal Delivery with intact perineum	29	12.6
Spontaneous vaginal delivery with tear	54	23.3
Spontaneous vaginal delivery (SVD) with episiotomy	131	56.7
Assisted vaginal delivery (Vacuum)	17	7.4
Duration of labour pain		
Less than six hours	52	22.5
6 to 12 hours	100	43.3
12 to 24 hours	72	31.2
More than 24 hours	7	3.0
Complications of new born		
Yes	22	9.5
No	209	90.5
Complications of mother		
Yes	30	13.0
No	201	87.0

Table 3: Prevalence of disrespect and abuse during facility-based childbirth (n=231)

Disrespect and abuse	Present n (%)	Absent n (%)
Physical abuse	80 (34.6)	151(65.4)
Non- consented care	157 (68.0)	74 (32.0)
Non-confidential care	52 (22.5)	179 (77.5)
Non-dignified care	52 (22.5)	179 (77.5)
Discrimination based on specific attributes	3 (1.3)	228 (98.7)
Abandonment/neglect of care	60 (26.0)	171 (74.0)
Detention in health facilities	0 (0.0)	231 (100.0)
Overall prevalence of disrespect and abuse*	162 (70.1)	69 (29.9)

*Mothers who faced disrespect and abuse in at least one among the seven categories

Table 4: Association of prevalence of disrespect and abuse with place of delivery

Prevalence of disrespect and abuse during childbirth by categories	Government Hospital (n=167) f (%)	Private Hospital (n=64) f (%)	Chi square	P value
Physical abuse	67 (40.1)	13 (20.3)	8.001	0.005
Non-consented care	126 (75.4)	31 (48.4)	15.5	<0.001
Non-confidential care	46 (27.5)	6 (9.4)	8.7	0.003
Non -dignified care	43 (25.7)	9 (14.1)	3.6	0.057
Discrimination based on specific attributes	2 (1.2)	1 (1.6)	Fisher Exact test	1*
Abandonment/neglect of care	50 (29.9)	10 (15.6)	4.9	0.026
Detention in health facilities	-	-	-	-
Overall disrespect and abuse	130 (77.8)	32 (50.0)	17.12	<0.001

P value is significant at ≤ 0.05

DISCUSSION

Every woman has right to give birth in the institution free from disrespect and abuse. The disrespect and abuse can be a barrier to utilization of facility for childbirth. In the current study 34.6% of the mothers were suffered from physical abuse during facility based child birth which was consistent with the findings of study conducted in Ethiopia¹² and contrast with the study done in Tanzania.⁶ Present study demonstrates 68% of the mothers received non consented care on the aspects of the woman’s right to information, informed consent, and choice/preferences. This finding was lower than the findings of the previous study conducted in Ethiopia, which showed 90%.¹³

Present study explains more than three fourth (77.5%) of mothers had received confidential care and only 22.5% of them received non confidential care which was similar to previous study conducted by Okafor et al.⁵ and study of Asefa et al.¹² In the current study 77.5% of the mothers were treated with dignity and respect and only 22.5% were not treated with dignity and respect which was consistent with findings of Okafor et al.⁵ but in contrast with Sando et al.⁶ which showed that 8.0% were treated with dignity and respect.

In the present study, most (98.7%) of the mothers were not discriminated based on specific attributes. The finding contrasted with the findings of the previous study done by Asefa et al.¹² which was 19.7%. Similarly, 74.0% of the mothers were never left without care and attention and only 26.0% were left without care and attention which was consistent with the previous study conducted by Okafor et al.⁵ and Sheferaw et al.¹⁴ All of mothers were never detained or confined against her will whereas study conducted in India showed 3.3% were detained or confined against her will.¹⁵

In the present study, the overall disrespect and abused reported during facility-based childbirth was 70.1%. The prevalence of disrespect and abuse was contradicted with findings of the previous study conducted by Sando et al.⁶ which was 15%, but similar to findings of the previous study conducted by Asefa et al.¹² This prevalence is high and comparable to those reported in Tanzania 70%,⁶ India 84.3%,¹⁵ Ethiopia 91.7%,¹³ Pakistan 97%¹⁶ and Nigeria 98%.⁵ The findings of this study showed 29.9% of post-natal mothers had received respectful and non-abusive care. The prevalence of respectful and non-abusive care is lower than the findings of the previous study conducted in Ethiopia, which was 57%.¹⁷

This study did not show significant association between the prevalence of disrespect and abuse with age, occupation, education, ethnicity, religion and family type. This finding was similar to the findings of the previous study conducted by Nawab et al.¹⁵ In the present study, there was significant association between the prevalence of disrespect and abuse during facility-based childbirth and place of delivery. This finding was supported by the previous study done in Pakistan.¹⁸

CONCLUSION

Near to three fourth of postnatal mothers were suffered from disrespect and abuse during facility based child birth in Pokhara. Regarding types of disrespect and abuse, more than one third was physical abuse, more than two third received non-consented care, near to one fourth received non-confidential and non-dignified care. More than one fourth left without care and attention. Thus, to increase respectful and non-abusive care during facility-based childbirth, practice of respectful maternity care should be promoted including development of clinical guidelines and protocols.

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