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Review Article: Respect for women's rights and maternity care

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Abstract

Women have a right to seek respectful maternity care (RMC) since it is legal this type of care is frequently provided in many unfavourable circumstances. The treatment of women should be based on ethical standards and respect for human rights and practises that take consideration of women's preferences and needs should be promoted. According to the World Health Organisation (WHO), it refers to the care provided to all women that uphold their dignity, privacy, and confidentiality; ensures their freedom from abuse and mistreatment; gives them the information they need to make an informed decision; and provides them ongoing support throughout labour and delivery.

Keywords: Respect for maternity care, women's rights, and quality care

Introduction

The cornerstone of high-quality maternity and newborn care is the provision of care that is safe, and considerate and permits women to keep their dignity and sense of autonomy [1]. Safe motherhood, which prioritises health promotion and the reduction of morbidity and mortality, additionally has to protect the fundamental human rights of women [2]. Women are entitled to demand RMC. However, inconsiderate maternity care is a frequent occurrence in many situations [3].

According to the World Health Organisation, "Every woman has the right to the highest possible standard of health, including the right to dignified, respectful care during pregnancy and childbirth, for the prevention and eradication of disrespect and abuse during childbirth" [4]. Women's care should be founded on ethical principles and respect for human rights and approaches that take into consideration women's choices and needs should be encouraged [5].

Respectful maternity care is defined as providing care to all women that respect their dignity, privacy, and confidentiality, assures their freedom from abuse and mistreatment, and provides them with the information they need to make an educated decision and receive ongoing support during labour and delivery (WHO) [5, 6].

Need for respectful maternity care

Over the past few decades, there has been a significant improvement in maternal and neonatal healthcare around the world, and the rates of maternal and newborn deaths have fallen [7]. As a result of a reinforced legal framework, effective clinical practises, and programmatic best practices, the standard of services delivered has grown. Despite these developments, not everyone has access to high-quality treatments, particularly during pregnancy and childbirth in developing countries [5, 8, 9].

Components of respectful maternity care

RMC's core values, according to the White Ribbon Alliance, include "respect for women's autonomy, dignity, empathy, privacy, confidentiality, feelings, choices, and preferences, including companionship during maternity care and continuous care during labour and childbirth, as well as prevention of harm and ill-treatment [10].

Mistreatment in maternity care areas

In reality, disrespect and abuse can manifest themselves in a variety of ways, from overt acts of physical assault to more covert (and potentially inadvertent) actions [11].

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Department of Medical Surgical Nursing, Kasturba Gandhi Nursing College, SBV University, Puducherry, India For instance, more overt behaviours can include a doctor hitting a lady while she is in labour or keeping her in the hospital against her will because of unpaid debts. More subtle behaviours include being penalised, going through interventions without information, consent, or shared decision-making, and being denied privacy [11]. Verbal abuse (insults, threats, extortion, and intimidation), no preference for a partner, abandoning the care of (leaving the woman alone or unattended), inadequate confidentiality, committing damaging acts, lacking knowledge about the care offered, giving consent that was not sufficiently informed, denying the ability to choose a birth position, preventing freedom of movement while working, and discrimination on the basis of race, gender, or sexual orientation. Due to unpaid facility expenses, the woman is being kept in the facility [6, 12, 13].

Aspects of respectful maternity care

There are twelve components of RMC, some of which are protecting women's dignity, preventing harm and abuse, maintaining confidentiality, offering potential information, and getting informed permission. Ensuring continued access to family and community support and raising the standard of the environment and available resources. Proper maternity care, effective communication, supporting a woman's choice to have a child, and having access to competent and motivated human resources are all important. Continuity in care, effective and efficient delivery of care [14, 15].

The following strategic areas can help in formulating a rigorous, evidence-based plan for providing high-quality care:

- Clinical recommendations.
- Care standards.
- Successful interventions.
- Quality indicators.
- Useful research and capacity development. [16]

Interventions for nurturing respectful maternity care

Training staff in interpersonal communication skills, changing values and attitudes, creating quality improvement teams, monitoring disrespect and abuse, staff mentoring, enhancing privacy inwards (by installing curtains or partitions between the beds), enhancing staff conditions (by providing tea to those working shifts), maternity open days, community workshops, and mediation/alternative dispute resolution are all examples of ways to improve the conditions of staff [16, 17].

Suggestion for action

- Medical institutions should allow women to choose their support person and privacy by using walls or curtains.
- Every pregnant woman should have regular access to professional routine and emergency care delivered safely, courteously, and cost-effectively.
- All pregnant women should get treatment without experiencing any type of prejudice, including verbal, physical, or sexual abuse. In order to take care of themselves and their children, women have a right to information and communication.
- Women's capacity to give birth is increased when they are included in the decision-making process and their choices are respected.

 Maternity health professionals must be respected and valued in addition to receiving the assistance, direction, and training they need and favourable working conditions that enable them to provide inclusive and compassionate care [18].

Conclusion

Pregnant women's maltreatment is a symptom of larger problems with the healthcare system, not a singular incident. Educating women about this right and giving them the confidence to stand up for themselves is a powerful tool against mistreatment [19, 20].

Conflict of Interest

Not available

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Not available

References

- 1. Sripad P. Trust in maternity care: A contextual exploration of meaning and determinants in peri-urban Kenya. Doctoral dissertation, Johns Hopkins University; c2015. DOI: 10.3389/fgwh.2022.818062.
- Stanton ME, Kwast BE, Shaver T, McCallon B, Koblinsky M. Beyond the safe motherhood initiative: Accelerated action urgently needed to end preventable maternal mortality. Glob Health Sci Pract. 2018;6(3):408-412. DOI: 10.9745/GHSP-D-18-00100.
- 3. Sheferaw ED, Bazant E, Gibson H, Fenta HB, Ayalew F, Belay TB, *et al.* Respectful maternity care in Ethiopian public health facilities. Reprod Health 2017;14(1):60. DOI: 10.1186/s12978-017-0323-4.
- 4. Ige WB, Cele WB. Provision of respectful maternal care by midwives during childbirth in health facilities in Lagos state, Nigeria: A qualitative exploratory inquiry. Int J Afr Nur's Sci. 2021;15:100354.

 DOI: 10.1016/j.ijans.2021.100354.
- Reis V. Respectful maternity care country experiences: Survey Report. United States Agency for International Development (USAID). 2012. Available at: https://toolkits.knowledgesuccess.org/sites/default/files/ rmc_survey_report_0_0.pdf. Accessed Date: 24 June
- 6. Hajizadeh K, Vaezi M, Meedya S, Charandabi SMA, Mirgha four and M Respectful maternity care and its relationship with childbirth experience in Iranian women: A prospective cohort study. BMC Pregnancy Child Birth. 2020;20(1):468.
 - DOI: 10.1186/s12884-020-03118-0.
- 7. Lassi ZS, Bhutta ZA. Community-based intervention packages for reducing maternal and neonatal morbidity and mortality and improving neonatal outcomes. Cochrane Database of Syst Rev 2015:2015(3): CD007754. DOI: 10.1002/14651858.CD007754.pub3.
- 8. Slawomirski L, Auraaen A, Klazinga NS. The economics of patient safety: Strengthening a value-based approach to reducing patient harm at the national level.
- 9. Amiri A. Role of nurses and midwives in improving patient safety during childbirth: Evidence from obstetric trauma in OECD countries. Applied Nur's Res. 2020:56:151343. DOI: 10.1016/j.apnr.2020.151343.
- 10. Ansari H, Yeravdekar R. Respectful maternity care

- during childbirth in India: A systematic review and meta-analysis. J Postgraduate Med 2020;66(3):133-140. DOI: 10.4103/jpgm.JPGM 648.
- 11. Bowser D, Hill K. Exploring evidence for disrespect and abuse in facility-based childbirth. Boston: USAID-Traction Project, Harvard School of Public Health. 2010. Available at:
 - https://collective.coloradotrust.org/wp-content/uploads/sites/2/2020/02/Respectful care_at_birth_9-20-101_final1.pdf.
- Asefa A, Morgan A, Bohren MA, Kermode M. Lessons learned through respectful maternity care training and its implementation in Ethiopia: An interventional mixed methods study. Reprod Health 2020;17:103. DOI: 10.1186/s12978-020-00953-4.
- 13. Bohren MA, Vogel JP, Hunter EC, Lutsiv O, Makh SK, Souza JP, *et al.* The mistreatment of women during childbirth in health facilities globally: A mixed-methods systematic review. PLoS Med 2015;12(6): e1001847. DOI: 10.1371/journal.pmed.1001847.
- Bohren MA, Tunçaip O, Miller S. Transforming intrapartum care: Respectful maternity care. Best Pract Res Clin Obstet Gynaecol. 2020;67:113-126. DOI: 10.1016/j.bpobgyn.2020.02.005.
- 15. Butler MM, Fullerton J, Aman C. Competencies for respectful maternity care: Identifying those most important to midwives worldwide. Birth 2020;47(4): 346-356. DOI: 10.1111/birt.12481.
- 16. World Health Organization. WHO recommendations: Intrapartum care for a positive childbirth experience. 2018. PMID: 30070803.
- 17. Tunça pÖ, Were WM, MacLennan C, *et al.* Quality of care for pregnant women and newborns: The WHO vision. BJOG 2015;122(8):1045-1049. DOI: 10.1111/1471-0528.13451.
- Lalonde A, Herschderfer K, Pascali-Bonaro D, Hanson C, Fuchtner C, Visser GH. The International Childbirth Initiative: 12 steps to safe and respectful Mother Baby-Family maternity care, Int J Gynecol Obstet. 2019;46011:65-73 DO: 10.1002/90.32844
- 19. Garcia-Moreno C, Palito C, Devries K, Stock H. Watts C, Abrahams N Globe and regional estimates of violence against women; prevalence and health effects of intimate partner violence and non-partner sexual violence. World Health Organization; c2013.
- Bradley S, McCourt C, Rayment, Parar D, Disrespectful intrapartum care during facility-based delivery in sub-Saharan Africa Qualitative systematic review and thematic synthesis of women's perceptions and experiences. Soc Med. 2016;169:157-120. DOI: 10.1016/socscimed 2016.09.039.

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