



Effects of Companionship During Labour on Women’s Experiences of Respectful Maternity Care

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INTRODUCTION/BACKGROUND

Companionship in labour and respectful maternal care are common issues in both private and public sector health facilities. Improving companionship in labour and respectful maternity care in these sectors is crucial for promoting institutional births and ensuring positive birth experiences.

A companion in labour also acts as an advocate to ensure the speedy delivery of the pregnant woman’s needs, offers encouragement and support during the event and reduces abusive tendencies during maternal care. Despite these advantages, different women have expressed varying views on the effect of the presence of a companion and whether they wanted one during delivery.

GENERAL AIM

This study assessed the prevalence of spouse companionship, and provided insights into women’s desire, and health care providers’ attitudes towards spouse companionship and respectful maternal care in labour

SPECIFIC OBJECTIVES

- To determine the prevalence and determinants of the rate at which women are accompanied to labor and delivery in referral health care facilities in Edo State, Nigeria.
- To assess women’s perceptions and experiences of companionship to labour and delivery facilities
- To explore health providers’ experiences and preferences for companions of women during labour and delivery.
- To assess the effects of birth companionship on women’s experiences of respectful care during labour and delivery in the hospitals.

METHODS

This study was conducted among women and their healthcare providers at three hospitals in Benin City, Nigeria. In the Quantitative method, 346 women who met the inclusion criteria were interviewed using an interviewer-administered questionnaire. The qualitative method involved focus group discussions with selected nurses and midwives. The Quantitative data were analysed using SPSS 25.0, chi-square analysis was done, Logistic regression was done and P-values of less than 0.05 were considered statistically significant. Qualitative data were analysed using themes analytic tools for qualitative analysis.

CONCLUSIONS

Despite the benefits of companionship in labour, some women were not allowed to have companions in labour in this study. We recommend developing a supporting guideline to improve the quality of maternity care, reduce disrespect and abuse during labour and childbirth, and improve women’s childbirth experiences.

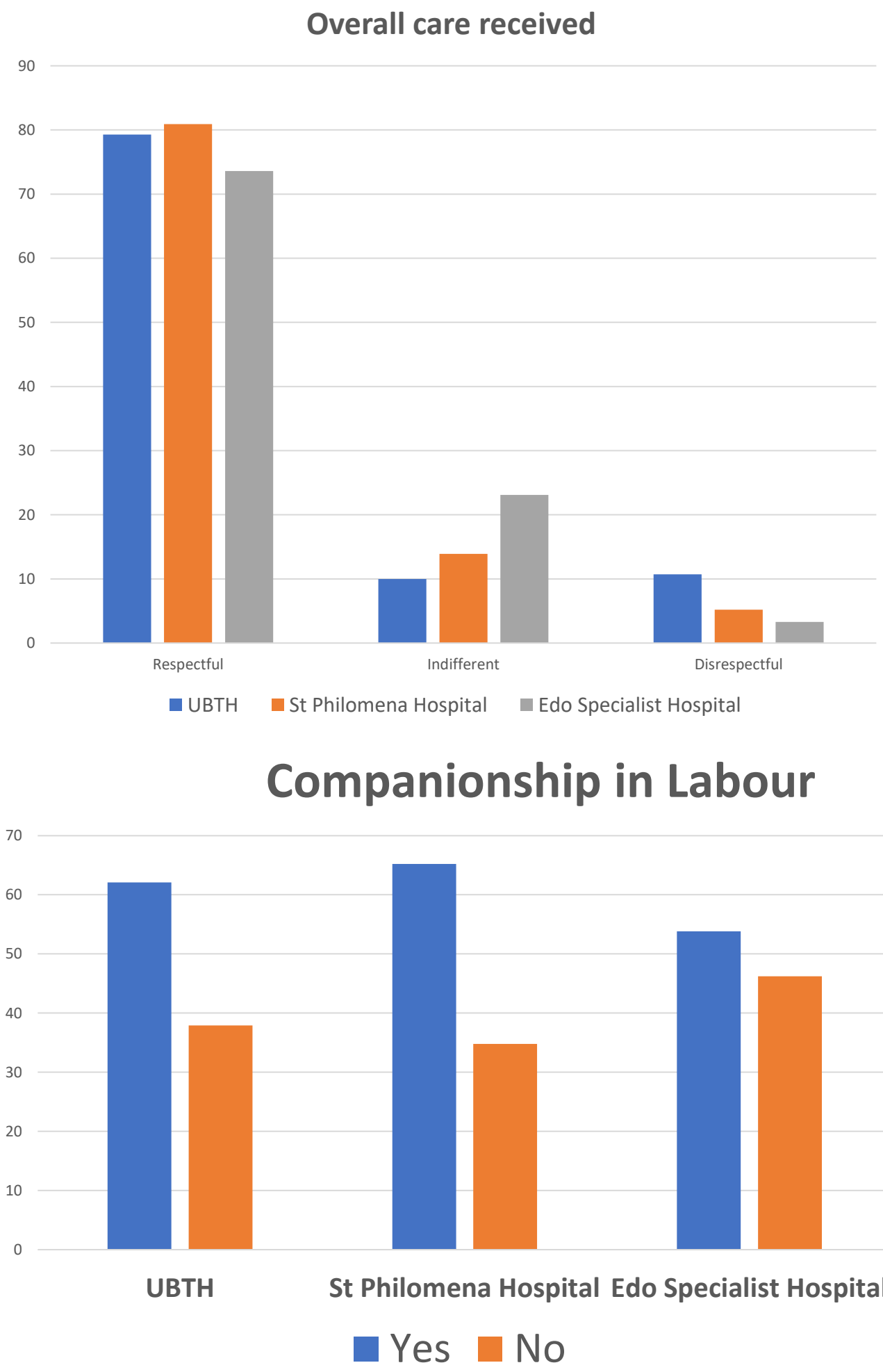
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We offer our special thanks to our patients and health workers who consented and participated in this study

RESULTS

The mean age of this study was 29.3±5.9. In this study, the majority (81.8%) of respondents were accompanied to the hospital. However, only 61.0% had companionship in labour. Companions provided physical and emotional support to 27.0% and 39.8% of respondents, respectively, while 33.2% received physical and emotional support. About 88.4% of respondents across the three facilities were treated well by attendants. Companionship in labour increases the likelihood of experiencing respectful maternity care. Occupational skill level was significantly associated with respectful maternity care ($p<0.001$) as respondents were noted to be 1.6 times more likely to experience respectful maternity care as their occupational skill level increased. Companionship in labour increased the likelihood of experiencing respectful maternity care with an odds ratio of 1.187. The focus group showed the benefits of labour companionship were emotional support for the woman, motivation for the partner, physical support and assistance, advocacy purposes, and assistance in information and communication purposes. while illiteracy, interference, lack of policy for companionship in labour and sociocultural norms were identified as the barriers.

TABLE : COMPANIONSHIP				
Variable	Hospital			
	UBTH (n =140)	St. Phil. (n = 115)	ESH (n = 91)	Total (n = 346)
	Frequency (%)	Frequency (%)	Frequency (%)	Frequency (%)
Did anyone accompany you to hospital				
Yes	116 (82.9)	86 (74.8)	81 (90.0)	283 (81.8)
No	24 (17.1)	29 (25.2)	10 (11.0)	63 (18.2)
Choice of labour companion (n=283)				
Self	97 (69.3)	63 (54.0)	64 (70.3)	224 (79.2)
Husband	17 (12.1)	20 (17.4)	15 (16.5)	52 (18.4)
Others	3 (2.1)	3 (2.6)	2 (2.2)	7 (2.4)
Why the choice for companion (n=283)				
Trust	44 (31.4)	53 (46.1)	22 (24.2)	119 (42.0)
Availability	36 (25.7)	10 (8.7)	39 (42.9)	85 (30.0)
Family	36 (25.7)	23 (20.7)	20 (22.0)	79 (28.0)
Type of labour Companion (n=283)				
Husband	65 (46.4)	62 (53.9)	62 (68.1)	189 (66.7)
Mother	18 (12.9)	25 (21.7)	12 (13.2)	55 (19.4)
In-laws	6 (4.3)	7 (6.1)	6 (6.6)	19 (6.7)
Sister	6 (4.3)	5 (4.3)	3 (3.3)	14 (4.9)
Others	4 (2.9)	1 (0.9)	1 (1.1)	6 (2.1)
Labour companion				
Yes	87 (62.1)	75 (65.2)	49 (53.8)	211 (61.0)
No	53 (37.9)	40 (34.8)	42 (46.2)	135 (39.0)
Companion role (n=211)				
Physical support	23 (16.4)	16 (13.9)	18 (19.8)	57 (27.0)
Emotional support	33 (23.6)	43 (37.4)	8 (8.8)	84 (39.8)
Both	31 (22.1)	16 (13.9)	23 (25.3)	70 (33.2)
Is companionship necessary				
Yes	132 (94.3)	108 (93.9)	77 (84.6)	317 (91.6)
No	8 (5.7)	7 (6.1)	14 (15.4)	29 (8.4)
Want companion next time				
Yes	134 (95.7)	110 (95.7)	76 (83.5)	320 (92.5)
No	6 (4.3)	5 (4.3)	15 (16.5)	26 (7.5)



RELATIONSHIP BETWEEN RESPECTFUL MATERNITY CARE AND SOCIO-DEMOGRAPHIC AND OBSTETRICS PARAMETERS OF RESPONDENTS				
Variable	Respectful maternity care Yes (n=271)	No (n=75)	Test statistic	P value
Age group (years)				
< 20	12 (63.2)	7 (36.8)		
20 – 29	133 (81.1)	31 (18.9)		
30 – 39	110 (76.4)	34 (23.6)		
≥ 40	16 (84.2)	3 (15.8)	$\chi^2 = 4.023$	0.259
Marital status				
Married	246 (79.6)	63 (20.4)		
Single	23 (69.7)	10 (30.3)		
Divorced/widowed	2 (50.0)	2 (50.0)	Fischer's exact = 0.456	0.897
Religion				
Christianity	247 (78.2)	69 (21.8)		
Islam	24 (80.0)	6 (20.0)	$\chi^2 = 0.054$	0.826
Level of education				
Primary	7 (53.8)	6 (46.2)		
Secondary	100 (79.4)	26 (20.6)		
Tertiary	164 (79.2)	43 (20.8)	$\chi^2 = 4.768$	0.092
Skill level				
Skill level 0	30 (58.8)	21 (41.2)		
Skill level 1	8 (80.0)	2 (20.0)		
Skill level 2	159 (79.5)	41 (20.5)		
Skill level 3	50 (86.2)	8 (13.8)		
Skill level 4	24 (88.9)	3 (11.1)	$\chi^2 = 15.500$	0.004
Parity				
Primipara	110 (80.9)	26 (19.1)		
Multipara	160 (78.9)	48 (23.1)		
Grand-multipara	1 (50.0)	1 (50.0)	Fischer's exact = 1.710	0.302
Type of labour				
Spontaneous	174 (79.8)	44 (20.2)		
Induced	97 (75.8)	31 (24.2)	$\chi^2 = 0.773$	0.379
Had companionship in labour				
Yes	168 (79.6)	43 (20.4)		
No	103 (76.3)	32 (23.7)	$\chi^2 = 0.536$	0.464

LOGISTIC REGRESSION MODEL FOR THE DETERMINANTS OF RESPECTFUL MATERNITY CARE					
Predictors	B (regression coefficient)	Odds ratio	95% CI for OR	p-value	
			Lower	upper	
Age	0.007	1.007	0.956	1.061	0.790
Marital status					
Married	0.321	1.379	0.559	3.401	0.486
Single/divorced	*				
Religion					
Christianity	-0.464	0.629	0.228	1.736	0.371
Islam	*				
Level of education	-0.068	0.935	0.571	1.531	0.788
Parity					
Primipara	0.478	1.612	0.881	2.951	0.122
Multipara/grand-multipara	*				
Occupational skill level	0.494	1.639	1.243	2.160	0.001
Type of labour					
Spontaneous	0.208	1.231	0.715	2.119	0.453
Induced	*				
Companionship in labour					
Yes	0.171	1.187	0.695	2.028	0.530
No	*				

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