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**SECOND STAGE BIRTH POSITIONS: PERCEPTIONS AND
REFERENCES OF MIDWIVES AND CHILDBEARING
WOMEN AT MOI TEACHING AND
REFERRAL HOSPITAL**

BY



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ABSTRACT

Background: Birth or pushing stage of labor positions and the related labor outcomes has come under considerable debate in the past two decades. Globally, women have used both supine and non-supine positions during birth. Women have free choice of birth place and to some extent the birth attendant but their role in the informed choice of birth position has not been clearly defined. The theoretical framework using the Health Belief Model has been used to define the variables related to the awareness and preferences of the users and providers of midwifery care. **Objective:** To describe the perceptions and preferences of second stage positions by childbearing women and their birth attendants at Moi Teaching and Referral Hospital. **Justification and Significance:** There is little or no documentation in literature of the perceptions and preferences for birth positions by childbearing women and their birth attendants. Second stage care practices have important effects on fetal oxygenation, pain of labor, duration of birth, perineal integrity and maternal satisfaction with the birth process. **Study Design:** This is a quantitative descriptive study using a cross-sectional design. **Study Population:** Women ($N=101$) attending antenatal care services and post-natal women following a normal delivery and practicing midwives ($N=63$) in maternity unit and maternal and child health clinic were interviewed. Primigravidas, nulliparas, women < 18yrs of age and those with medical or obstetrical complications were excluded. **Study site:** The ante-natal and post-natal units of Moi Teaching and Referral Hospital. **Methods:** Semi-structured questionnaires were used to collect preferences data. Data on perceptions were collected using a 17 item Likert Scale with values ranging from 5-1. The data collection tool was tested for reliability; Cronbach's alpha (.73). Data were analysed using SAS version 9.2. **Results:** The results revealed that supine positions were the most preferred by both midwives and women, while the lateral position was the most preferred non-supine position for both study groups. However, there was a difference between midwives and women's preferences of non-supine birth positions ($\chi^2 25.33$; d.f. 4; $p < .005$). The results also revealed that there was no statistically significant difference between women's and midwives' perceptions for supine ($t = 1.69$; $p = .0939$) and non-supine ($t = -.76$; $p = .799$) birth positions using the Likert scale scores. **Conclusions:** This study revealed that supine positions were the most preferred by both midwives and women participants. More women preferred the lateral position than the midwives and the sitting position was the least preferred among both groups. The study also suggested a conflict in preference for non-supine positions between midwives and childbearing women and that the women preferred non-supine positions more than midwives. **Recommendations:** This study recommends empowering women in labor who with their midwives understand and exercise their right to choose birth positions according to safe personal preferences in order to foster: patient satisfaction, relaxation and better birth outcomes.