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**INTRAPARTUM PRACTICES OF MIDWIVES IN MOI TEACHING AND
REFERRAL HOSPITAL LABOUR WARD DURING NORMAL
CHILDBIRTH**

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(BSC. NURSING)

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ABSTRACT
**INTRAPARTUM PRACTICES OF MIDWIVES IN MOI TEACHING AND
REFERRAL HOSPITAL LABOUR WARD DURING NORMAL
CHILDBIRTH**

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Introduction: Normal childbirth is regarded as a natural or physiological process. Thus, the care here-in should be effective and supportive of this process. However, normal childbirth is often managed like an illness rather than a normal life event. The situation among midwives of MTRH may not be different from elsewhere in Africa where normal birth care is not evidence based and is often intervention intensive.

Aim of the Study: The study was aimed at identifying and describing the normal childbirth care practices of midwives in MTRH labour ward.

Specific Objectives: This study observed the normal childbirth care practices of midwives in MTRH and evaluated them against the Kenya National Guidelines, WHO's and Lamaze recommendations for care during normal childbirth. The study also described the constraints and opportunities of the midwives in implementing the normal childbirth care practices.

Methods: This was a descriptive survey, which utilized a structured observation checklist and key informant interviews to collect data. All the midwives in the MTRH labour ward were observed attending to one mother undergoing normal birth each. Then, two key informants; the midwife in-charge of labour ward and the midwife in-charge of the reproductive health unit, were interviewed to elicit the opportunities and constraints in implementing the normal childbirth care practices.

Findings: Out of the seven positive practice recommendations above, only two were performed in more than 50% of the cases- freedom of movement during first stage of labour (100%) and initiation of breastfeeding within 30 minutes after birth (67.9%). The commonest negative interventions were intravenous infusion (60.7%) in first stage and restriction of oral intake (77.4%) in second stage. The main constraints implementing the evidence based practices are lack of information and lack of exposure of the midwives to some of the practices. The main opportunity in implementing the practice guidelines is regular training for midwives.

Conclusion: The midwives of MTRH are lacking in a number of aspects regarding care during normal childbirth.

Recommendations: The lacking practices like adequate ambulation, birth in non-supine positions and spontaneous pushing need to be encouraged among the midwives. Such practices can be included in the protocols.