

Redefining the way midwives prepare women for their early mothering role

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Aim of the presentation

- Discuss findings related to women's preparation for early mothering from data collected as part of an evaluation of a model of care for first time mothers.
- Discuss ways in which midwives can facilitate women's preparedness for their mothering role through two different but complementary approaches

Background

“Feelings of being overcome and unprepared are heightened once women realise the impact that the new baby has on their lives”

Crouch and Manderson, 1993

The findings which form the basis of this paper are part of an evaluation of a newly introduced model of care for first time mothers attending the Primary Care Service, Community Child Health Service (CCHS), Royal Children's Hospital and Health Service District, Brisbane.

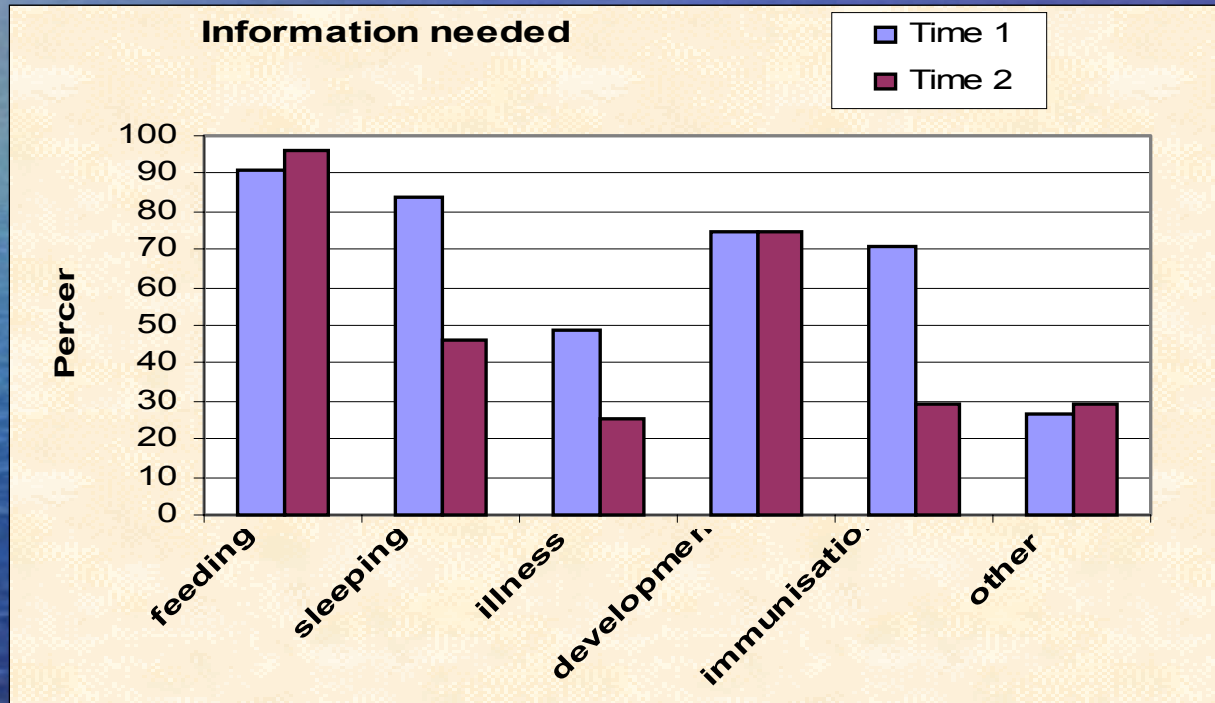
The Model aims to improve provision of information, facilitate the development of social support and address individual needs.

- A quasi-experimental study design was used. Mothers entering both the intervention (New Model) and control group (Standard) services were interviewed by phone at 3 months, 6 months and 12 months.
- Demographic
 - 83% of the control group and 69% of the intervention group have tertiary qualifications
 - 99% of the total sample are married or living in a de-facto relationship

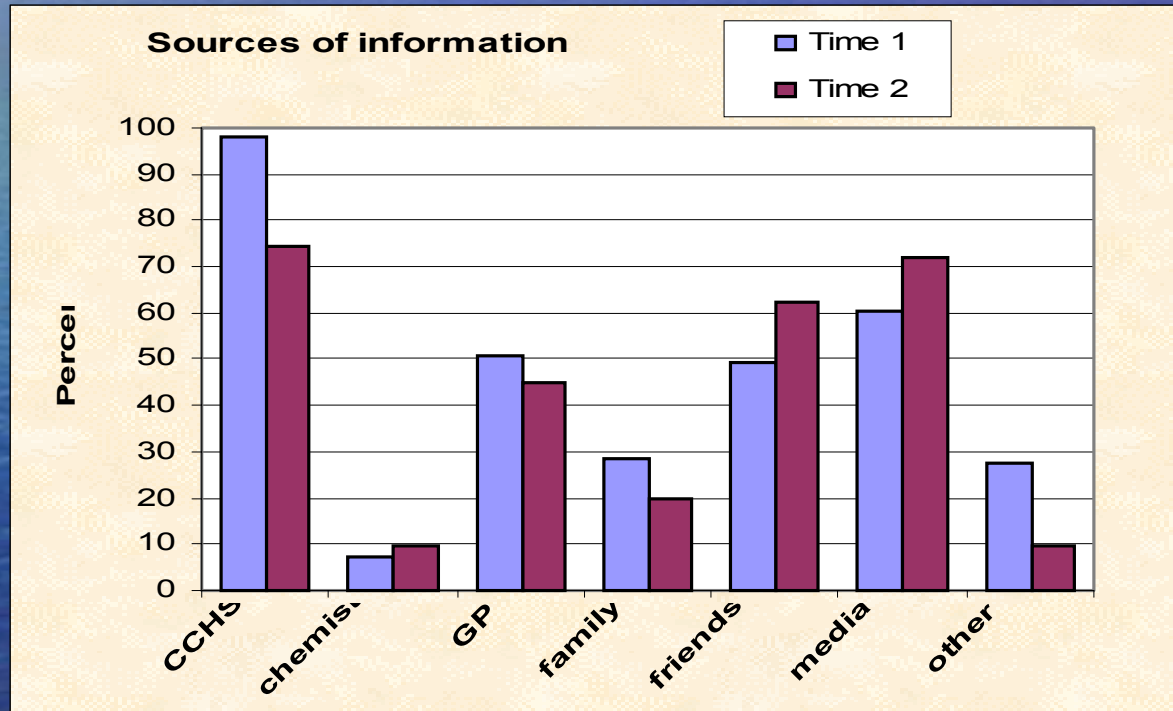
Findings

- Data collected via telephone interview at Time 1:
 - 89 in the intervention group and
51 in the control group
- Time 2 (6 months) 132 interviews at Time 2 (6 months):
 - 82 in the intervention group
50 in the control group

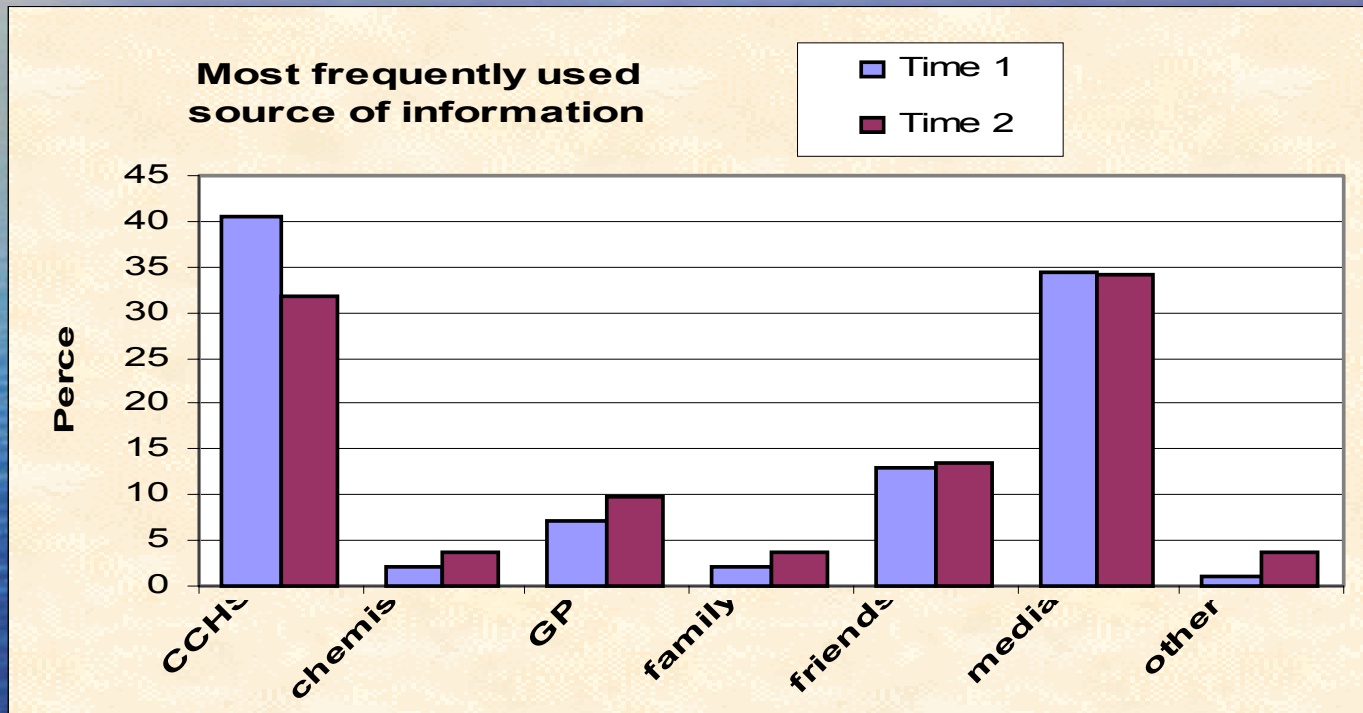
Information needed



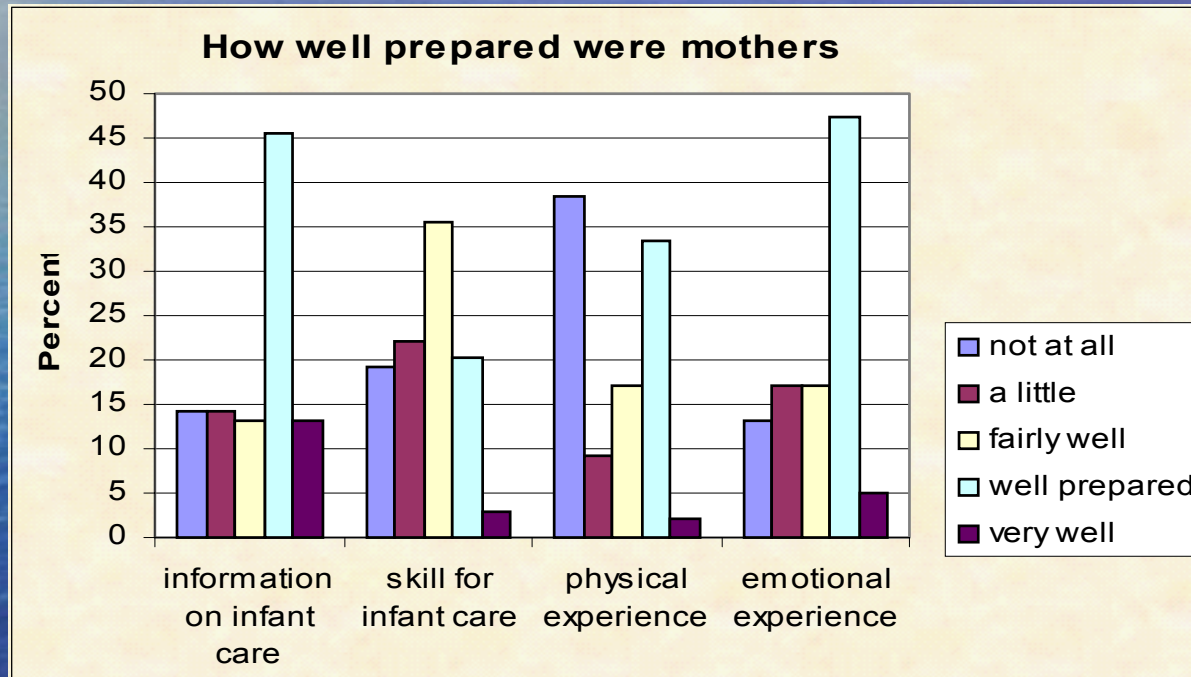
Sources of information



Most frequently used source of information



How well prepared



...was so busy preparing for birth,
didn't learn enough about baby
care

- Of 99 qualitative responses to "ways to be better informed or prepared"
 - 25 felt prepared or believed that there was no way you can be prepared – "it is a trial and error process"
 - 76 felt ill prepared in one of the following aspects:

Issues and Concerns

- Breastfeeding
- Infant sleep patterns and unsettled babies
- Lifestyle change needed
- Physical changes of postnatal period – stamina needed
- Fatigue and Exhaustion – sleep deprivation
- Some questioned the value of antenatal classes in preparation for baby – too much focus on birth

Comments

- Needed better preparation for breastfeeding, think you have to experience sleep deprivation to believe it
- Breastfeeding was a hideous shock, very difficult and painful, difficulties were unexpected and grossly underestimated antenatally
- Antenatal classes not useful to prepare for motherhood

Women's comments cont'd

- Antenatal classes didn't help with PN time, had no idea how hard it is, was a big shock, didn't receive enough help in hospital and discharge very early, not prepared for fatigue and amount of work involved.
- Wasn't prepared for the fatigue associated with lack of sleep, difficult to prepare for such a big life change
- Wasn't prepared for life with a baby
- More info needed on breastfeeding

Discussion

- This study and other literature suggest that women would like more information about the baby (Schneider 2002; Ho and Holroyd 2002, Renkert and Nutbeam2001)
- Antenatal education is based on an assumption that women are unable to focus (learn?) about the time after birth (Schneider 2002)
- There is a clash of cultural expectations and biology which lead to naming of early infant behaviour as problematic (eg McKenna)

Health Literacy –

- Defined as “...the cognitive and social skills which determine the motivation and ability of individuals to gain access to, understand, and use the information in ways which promote and maintain good health” WHO 1998
- Focuses on the development of skills and confidence to make choices rather than transmission of information (Renkert and Nutbeam 2001)

Baby Friendly Strategies

- Breastfeeding education across the childbearing continuum
 - Antenatal focus
 - Labour and birth
 - Postnatal and community follow up
- Hospital practices which support breastfeeding

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