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Mother's validation of midwives care in the management of labour pain in Plateau State

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The process of labour and delivery of a child can be very painful, over 90% of women experience severe/unbearable labour L pain (Charlton, 2005) however it has been observed that nurses pay little or no attention to managing the pain of labour, they go about their routine nursing activities of hourly vital signs check, hourly fetal heart rate check and four hourly vaginal examination but leaving the women to go on in agonizing pain. Severe labour pain has been implicated in contributing to long term emotional stress with potential adverse consequences on maternal mental health and family relationships (Charlton, 2005). The purpose of this study is to describe mother's validation of the care midwives provides in the management of labour pain in Plateau state. A descriptive cross sectional design was employed for the study. 126 women (n=126) with uneventful pregnancy and labour were recruited from a hospital in Jos city, Plateau State. Participants completed the "Client Perception of Caring Scale" and thereafter were interviewed using a structured interview, a day after their delivery. Mean age of participants was 28 years, majority of them i.e. 125 (99.2%) are married, 116 (92.1%) are Christians while 67 (53.2%) are multigravid. Findings showed that only 71 (56.3%) of the women gave an average score to the midwives, 28 (22.2%) said the midwives really gave them listening ears and reassured them that all will be well and 33 (26.2%) said the interventions were very effective in helping them cope with the labour. Linear regression analyses revealed that selected demographic variables; Age (β =.092, t=1.005, p=.317), Religion (β =-.008, t=-.090, p=.928) and Parity (β =-.155, t=-1.720, p=.088) do not have any association with the outcome of care given by midwife. In conclusion, women validated their management of labour pain by midwives to be on the average thus more training of midwives in the area of labour pain management is essential and hospital administrators must employ more midwives into the labour wards so that one on one support is encouraged hence improving the overall satisfaction of labour for any woman.

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