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# **MIDWIVES' COLLECTIVE ATTITUDE TOWARDS LABOUR PAIN: MIXED METHODS RESEARCH**

Akademisk avhandling

Som för avläggande av Shurouq Hawamdeh doktorsexamen vid Sahlgrenska akademien, Göteborgs universitet kommer att offentligens försvaras i sal 2118, Hus 2, Hälsovetarbacken den 1 Mars 2019 klockan 09.00.

av Shurouq Hawamdeh

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**Avhandlingen är en Monografi**

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# MIDWIVES' COLLECTIVE ATTITUDE TOWARDS LABOUR PAIN: MIXED METHODS RESEARCH

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## **Abstract**

*Background:* The majority of women in Jordan give birth in public hospitals where midwives are the main birth attendants. Although most women have trust in their midwives, studies have reported women's dissatisfaction with childbirth, fears of painful labour, and experiences of ineffective pain management during childbirth. Studies that have explored midwives' collective attitude towards labour pain are lacking. *Aim:* To explore midwives' collective attitude towards labour pain by measuring/interpreting midwives' knowledge and individual attitudes towards labour pain and women's expectations and perceptions surrounding their midwives' attitudes towards labour pain. *Setting:* The research was conducted at the labour and postnatal wards in the largest public hospital in Jordan (18000 normal vaginal deliveries/year). *Design:* Convergent parallel mixed methods research design. *Methods:* A validated Survey Questionnaire for Midwives (SQM), a validated Survey Questionnaire for Women (SQW), audiotaped individual interviews with five midwives, and one focus group with six women who recently had giving birth. The doctoral candidate and supervisors developed the SQM and the SQW in 2012 and validated them in 2013. The SQM and SQW were developed based on Leap & Anderson's *Working with Pain Model* and Kennedy's *Exemplary Model of Midwifery Practice*. The sample consisted of sixty-one midwives and 384 women who had recently delivered at the hospital. In all 60/61 midwives completed the SQM and 360/384 women completed the SQW. *Analysis:* Quantitative data were analysed using parametric statistical tests and qualitative data were analysed using a life world hermeneutic approach. *Findings:* The midwives had a high knowledge about labour pain (SQM, Mean=3.82, SD=0.53) and a neutral collective attitude (neither positive nor negative) towards labour pain (SQM, Mean=3.41, SD=0.51). The women in turn had a very high expectation of their midwives' collective attitude towards labour pain (SQW, Mean=4.52, SD=0.45) and they had neutral perception of their midwives' collective attitude towards labour pain (SQW, Mean=3.43, SD= 1.13). The women expected their midwives to be patient

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(n=316, 87.8%), reassuring and soothing (n= 291, 80.8%) and understanding (n=273, 75.8%) in their collective attitude towards labour pain. The relationship between SQW and SQM was statistically significant ( $p<0.05$ ) and moderately positive ( $p<0.001$ ,  $r = 0.53$ ). Four themes emerged from the analysis of the midwives' interviews: (1) midwives see labour pain as suffering when women experience negative emotions, (2) working with women's pain in labour is based on an individual perspective which demands time, (3) working with women in pain by using midwives' own strategies and influence the women's way of thinking, and (4) the institution makes inability to work on women's pain without being given a chance to prove it. The main interpretation that concludes the four themes was the dominance of the *with institution ideology* despite the intentions to demonstrate the *with women ideology*. Four themes emerged from the analysis of the focus group interview with women: (1) caring calms the women and relieves labour pain, (2) empowerment enables women to tolerate and cope with labour pain, (3) uncaring attitudes of midwives create negative emotions and fear on the part of the women, and (4) making women feel discouraged about coping with labour pain may lead to feelings of worthlessness. The main interpretation that concludes the four themes was a predominantly *uncaring* and discouraging approach even where a *caring* attitude and feeling of empowerment had been reported during the first stage of labour. *Conclusion:* Midwives had a neutral collective attitude towards labour pain as they mostly adopted the *with institution ideology* and *uncaring* attitude in their collective attitude towards labour pain. The midwives' neutral collective attitude towards labour pain had a negative influence on women. Women reported fear, suffering, dissatisfaction, sense of worthlessness, sense of disempowerment, and inability to tolerate and handle labour pain due to this attitude. Women described that the midwives were more attentive to the needs, the standards, and the guidelines of the hospital than the needs of the women i.e. they seemed to have adopted the *with institution ideology*. Midwives' collective attitude towards labour pain should be considered when educating and training midwives in Jordan. There is a need to explore midwives' collective attitude in other settings and contexts. Further exploration of other types of collective attitude towards labour pain i.e. very positive, positive, negative and very negative is required. Future research should utilize explanatory sequential mixed methods research to explain collective neutral attitude. Future aptitude-response-based research in different settings is also important.

**Keywords:** childbirth, collective attitude, expectations, Jordan, knowledge, labour pain, midwives, mixed methods, perceptions, women.