

Husband Support to their wives During Maternal Period

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Abstract:

Background: Husband support to their wives during maternal period is identified one of the emerging issues in developing country. People perceived the pregnancy and child birth as women's domain. Hence it is important to encourage husbands to support their wives during maternal period.

Methods and Materials: A descriptive research design was employed. The structured interview schedule was used to collect data among 100 husbands of pregnant women attended in Antenatal clinic of Patan Hospital and Paropakar Maternity and Women's Hospital Thapathali Nepal.

Result: The mean age was 21.6. Among them, almost all (99%) of participants were literate. Regarding support on birth preparedness, 92% had saved money, 61% had arranged transportation however only 16% were aware about importance of arrangement of blood donors. Eighty three percent of the participants were willing to deliver their child in health institute and 72% wanted to help during delivery of child and 90% wanted to take care of newborn and their wives during postnatal period.

Conclusion: The study concluded that a significant proportion of husbands were willing to provide support during maternal period. There are still people need to be aware and help their wives.

Keywords: Antenatal, Childbirth, Husband Support, Postnatal Care, Wives

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I. Introduction

Maternal deaths are to a large extent preventable. Approximately 15% of all pregnancies will have serious complications that could lead to death but even the five "big killers"—haemorrhage, infection, unsafe abortion, eclampsia and obstructed labour—can be treated or prevented if births are attended by a skilled health professional and emergency care is readily available,¹ therefore involving men in the maternity care of their pregnant partners has become important because of the realisation that men's behaviour can significantly affect the health outcomes of the women and babies². United Nations Population Fund (UNFPA) marked World Population Day today by calling for greater participation by men in maternal health to reduce the number of women who die each day in childbirth and to ensure safe motherhood.⁵

In Nepal, there is still lack of involvement of husband from antenatal to postnatal period due to stigma associated with male assistance during pregnancy. People perceived the pregnancy and child birth as women's domain. In general, women's status is low under the influence of culture, traditions economic limitations, educational and legal discrimination of the dominantly patriarchal Nepalese society. Men play dominant roles not only in decision making but also physical and social context in patriarchal society. A study in Nepal shows that about 52 percent husbands decide for their wives' health care³

The positive associations between joint decision-making and male involvement imply that couple communication and shared negotiation strategies can improve health practices. These results indicate that programs intended to increase women's empowerment and/or women's health must consider the dynamics and ramifications of including or excluding males in their efforts. Involving husbands and encouraging couples' joint decision-making in reproductive and family health may provide an important strategy in achieving both women's empowerment and women's health goals.⁴

As partners for maternal health, men can save lives. The support of an informed husband improves pregnancy and childbirth outcomes and can mean the difference between life and death in cases of complications, when women need immediate medical care. Experience shows that male involvement can make a substantial difference when it comes to preserving the health and lives of women and children.⁵ According to different literatures, maternal morbidities could be prevented if husband support to their wives during pregnancy to postnatal period so the objective of the study is to determine the husband support provided and willing to provide during maternal period.

II. Methods And Materials

2.1 Methods

A descriptive research design was used for this study. This study describes the willingness and provision of husband's support to their wives during maternal period. The population of the study were those husbands who accompanied their pregnant wives to attend antenatal clinic of Patan hospital and Paropakar Maternity and Women Hospital, Thapathali Nepal. The sample size was 100 husbands. Non probability purposive sampling technique was used to select sample for the study.

2.2 Materials

A structured interview schedule was developed by researcher which consisted of three sections. Section I included demographic information and support provided during antenatal period, section II consisted of husbands' willingness to provide support during childbirth and section III support during postnatal period included diet, rest newborn care immunization and household activities.

2.3 Validity, Reliability of the Tool and Pretesting

Content validity was established with the help of expert in the related field and the reliability was established by pretesting in Tribhuvan University Teaching Hospital, Nepal. After pretesting, the finding was identified as feasible and researchable.

2.4 Data Collection

Before data collection, formal administrative permission was obtained from of Patan hospital and Paropakar Maternity and Women Hospital, Thapathali Nepal. Informed consent was taken from participants. Collected data were classified according to the objective of the study then analyzed and interpreted by using descriptive and through the Statistical Package for Social Science (SPSS) and presented in tables.

III. Results

Table 1: Husbands' Support during Antenatal Period n=100

Variables	Frequency	Percentage
Accompany to ANC visit		
All visits	77	77.0
Some visits	23	23.0
Support on birth preparedness*		
Saving money	92	92.0
Arranging transportation	61	61.0
Arranging safe delivery site and skilled birth attendant	89	89.0
Arranging blood donors	18	18.0
Support on household activities * (n=92)		
Heavy lifting	88	95.6
Fetching water	75	81.5
Cooking food	65	70.6
Washing clothes	54	58.6
Washing dishes	52	56.5

* Multiple responses

Regarding socio-demographic variable of the participant, 50% of participants were from age group 25-29 and the least 5% were from age group 15 – 19 and the mean age of the participant was 21.6. Ninety nine percent of participants were literate though 41% had education above higher secondary level. Regarding occupation, more than half (51%) was service holder

Table 1 shows regarding husbands support during antenatal period. Majority (77.0%) of husbands accompanied their wives to antenatal clinic. For the preparation of birth, 92% participants saved money for childbirth and to assist household work, most of (95.65%) the participant helped to lift heavy weight.

Table 2: Husbands' Willingness to Support during Intranatal Period
n=100

Variables	Number	Percent
Decision of place of delivery(n=89)		
Hospital	85	95.5
Home	4	4.5
Willingness to support during labour		
Giving extra food	68	68.0
Stay with wife during labour	72	72.0
Willingness to support on labour* (n=72)		
Giving assurance	72	100.0
Massage back	68	94.4

Holding hands	68	94.4
Staying throughout childbirth	43	59.7

* Multiple responses

Table 2 depicts about husbands willingness to support during intranatal period. Most of (95.5%) of the participants had decided to take hospital for delivery. During labour pain, 72 percent of participants wanted to stay with their wives and all of them want to give assurance.

Table 3: Husbands’ Willingness to Support during Postnatal Period n =100

Variables	Number	Percent
Willingness to support on breastfeeding		
Yes	59	59.0
No	41	41.0
Willingness to support on Newborn care*		
Helping in caring for newborn		92.0
Taking newborn for immunization	92	95.0
	95	
Willingness to support to mother*		
Willingness to accompany on follow up visit		
Changing napkin	96.0	96.0
Cooking food for wife		
Giving baby bath	82	82.0
Oil massage to baby	73	73.0
Giving oil massage to wife	72	72.0
Washing dishes	68	68.0
	66	66.0
	62	62.0

* Multiple responses

Table 3 reveals that 59% participants wanted to support on breastfeeding. Regarding newborn care and postnatal mother care, most of (92%) participants wanted to care newborn, 96% of the participants wanted to accompany with their wives follow up visit, 82% wanted change napkin following 73% wanted to cook food for their postnatal wives.

IV. Discussion

Regarding age group of participants (50%) of husbands are from age group 25-29 and the mean age is 21.6 Almost all (99%) of participants were literate with different level of education. Among them, There were secondary (47%) and intermediate (41%) and above level of education. Regarding occupation, 50% are service holder. The relationship between gestational period and number of ANC visits, shows that 56 percent of the mother were in third trimester and (72%) of the mother visited equal or more than four visit which is similar to WHO at least four visit during pregnancy. This findings is more than national figure of Nepal Demographic Health Survey (NDHS) (44.1%) four ANC visits.⁶

This finding related to company given by husbands during antenatal visits, 77 percent husband attended all ANC visits with their wives. The finding is supported by Mullik S which has shown that 89 percent husband accompanied their partners.² To decide for antenatal visit, more than half (54%) of the participants helped in deciding to visit ANC to their wives and 34% participant decided by himself 54% couple decided together which is slightly higher in literature cited in Mullany BC.⁴

Husbands’ awareness on mothers needs for special care during pregnancy period, 91 percent of participants wanted to help in heavy lifting, cooking food(58%), washing clothes (58%) which is supported in the study (57%) and (68%) participants helped to reduce household workload to their wives conducted by Mullany BC⁴. Extra care during labour reduces the stress of mother. In this regard, 68 percent of participants are aware of need of extra food during labour and 72 percent of participants even want to stay with their wives if allowed. Almost all of them have knowledge about how to support during labour such as giving assurance (72%) massaging back (68%), holding hands (68%) and staying throughout the process of birth (43%). This finding is similar to the study conducted by Mullik S².

Regarding husbands willingness to support during postnatal period, Most of (92%) the participants want to help their wives to take care of newborn and (95%) want to take their newborn for immunization. Ninety six percent of participants have shown willingness to accompany their wives during postnatal check up whereas the study conducted by Varkey LC, et al. male involved in newborn immunization and accompanied their wives for postnatal visit (66.3%) and(47.2%) respectively⁸. Even they want to help during postnatal period to reduce household work to their wives changing napkin (82%), cooking food for wives (73%), and giving oil

massage to newborn (68%) and 59 percent willingness to support on breastfeeding which is higher(95.4%) in the study conducted by Varkey LC, et al ⁸.

V. Conclusion

It is conclude that the provision and willingness of husband support to their wives is increasing. Although the finding indicated the more willingness and provision of husbands support during maternal period, the health policies and strategies should be implemented to promote such supports which directly influence maternal and neonatal health.

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