

# Attitude of Prime-Pregnant women toward Normal Vaginal Delivery in Southern of Babylon Governorate

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## Abstract

Normal vaginal delivery occurs when the mother birth of the fetus through vaginal canal, during this kind of birth mode, gravid women take special classes about labor and delivery process, how to prepared for it and learn the ways that lead to cope with the fear, anxiety and pain. Descriptive study cross sectional design, the study carried out to identify the attitude of prime-pregnant women regarding normal vaginal delivery in southern of Babylon governorate in Iraq. The results show (39.5%) as a highest percentage of study sample at age ranging between (19-22) and more of them (33.0%) with secondary school as level of education, also the assessment of response rate for prime pregnant women regarding overall domain of normal vaginal delivery was (Positive) for attitude regarding physiological delivery at mean of score (2.46) and attitudes regarding perceived behavioral control of normal vaginal delivery at mean of score (2.39) while the assessment of attitudes regarding personal and practical choice and sources of motivation was (Not sure) at mean of score (2.12).

**Keywords:** Attitude, Prime-women, Normal Vaginal Delivery, Southern Babylon governorate.

## Introduction

Pregnancy is a major alteration in a woman's life which leads to multi psychological changes than each other life condition in additional to puberty during pregnancy, the shape and size of woman's body is changed, and the whole organ systems change their roles to make an environment that save and supply the growing fetus. Pregnancy is divided into three trimesters, each a 3- month period. During the pregnancy period every trimester has its own developmental characteristics for the mother and fetus <sup>(1)</sup>.

The rate of mothers who don't opted the physiological birth and undergoing to other mode of delivery in the absence of medical indication is increasing in the world. Women attitude have an essential role in the request or selecting a birth mode. Poor the awareness, knowledge,

beliefs, attitudes and behaviors of pregnant women which effect on the choice of delivery mode, therefore in many cases lead to avoided the physiological birth <sup>(2)</sup>.

Primary signs of labor that include descent of the fetus, Braxton Hicks constriction, cervical dilation and effacement, bloody show, sudden active energy and other signs spontaneous rupture of membranes may occur <sup>(3)</sup>. Benefits of physiological birth includes decrease the pain in postpartum period; faster physical recovery from the delivery ;increase the women welfare as an outcome of the delivery ; promote the relationship of mother with her baby; decrease probability of postpartum depression; a quiet and more stable baby; and facilitate breastfeeding experience for the women; active respiratory transmission into the baby; and more active digestive canal colonization which stop the allergy in the baby <sup>(4)</sup>.

Health education can play an important role to increase knowledge, and change attitude and behavior of pregnant women using applicable theories and models <sup>(5)</sup>. The aims of antenatal (childbirth) health education

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are to increase women's trust in their own capability to deliver, to improve knowledge and attitude about normal vaginal delivery, and to assist pregnant women in developing personal birth plans which provide a way map for save birth as normal as possible in spite of if complications happened <sup>(6)</sup>.

Many studies have shown lowest ratio of normal vaginal delivery rather than other type of birth in the world. In the united states was 22%, 25% in Brazil was 25%, 27% in Chile, while from 17- 40% in 19countries of Latin America. The recommendation of (WHO) show that the rate must not overrun 15% of whole deliveries <sup>(7)</sup>. In Middle East countries like Iran (NVD) had lowest rate while other delivery like (CS) have the highest rate was (41.9%) in 2008 and it considered as the second highest rate among other countries . Isfahan in the south of Iran has even higher rate than the national rate (62%) in 2012 <sup>(8)</sup>.

In Iraq, the normal vaginal delivery rate has begun to decline with increasing the percentage of cesarean section and other delivery, in the public sector was 24.5% during 2009 increased to 25.8% during 2010, whereas in the private sectors the percentage was very much higher reaching 75.8% and 79.5% during the years 2009 and 2010 respectively <sup>(9)</sup>.

The study aim was to identify the level of attitude of prime-pregnant women regarding the normal vaginal delivery and find out the relationship between the subjects of attitude and their variables in southern Babylon governorate.

### **Material and Methods**

A descriptive study was carried out in primary health care centers at southern of Babylon governorate, the study was conducted on prime pregnant women in second and third trimester of pregnancy in order to assess their attitude about normal vaginal delivery by using a questionnaire, the study was initiated from (25 March 2018 to 10 August 2018). The study was conducted in southern Babylon province at (8) centers of primary health care, these centers belonging to Al-Hashimya sector and selected randomly to current this study and gathering the data.

Non probability "convenient" sample consists of (200) prime pregnant women has been chosen from 8 primary health care centers at Al-Hashimya sector in southern of Babylon governorate, all of them are registered in the primary health care centers at antenatal period (second and third trimester) of pregnancy. The tools which were used in this study (questionnaire form) were opted after a reviewing the previous literature and were exposed to many modifications by researcher for adopting as an instrument to use in the study to identify the attitude of prime pregnant women regarding normal vaginal delivery at southern Babylon governorate.

### **Results**

the distribution of the pregnant women socio-demographic characteristics by the frequencies and percentage have been taken under considerations. Results indicate that most of women (39.5%) are within second age group (19-22) years old. Concerning women level of education and their occupation. A (33.0%) and (67.0%) respectively were secondary school graduated and works at home. Regarding monthly income, it is obvious proportion (54.5%) were satisfied to certain limit and (66.0%) of them residences at urban areas. Finally, in this table, women their husband educationally and occupationally, (38.0%) of them are primary schools graduated and (57.5%) were free works (self-employ).

Table (1) concerned with assessment of women attitudes about normal vaginal delivery. A majority of (50% and 54%) have positive attitudes towards normal vaginal delivery (mean of score 2.34 and more). A majority of (61%) of women were not sure attitudes towards practical choice and sources of motivation (mean of score 1.67-2.44).

Table (2) show that there is a significant relationship between women's attitudes and their demographic regarding normal vaginal delivery at p-value <0.05. As well as, there is high significant relationship between women monthly income and woman's husband occupation at p-value <0.01. Residency insignificant relationship with women attitudes at p-value >0.05.

**Table (1): Overall Assessment of Pregnant Women Attitudes by their Responses Domains**

Attitudes Domains	Scale	F	%	S.d.	M.S.	Assessment
Attitudes Regarding Normal Vaginal Delivery	Agree	96	48.0	0.53	2.46	Positive
	Uncertain	100	50.0			
	Disagree	4	2.0			
	Total	200	100			
Attitudes Regarding Perceived behavioral control of Normal Vaginal Delivery	Agree	85	42.5	0.55	2.39	Positive
	Uncertain	108	54.0			
	Disagree	7	3.5			
	Total	200	100			
Attitudes Regarding Personal and Practical Choice and Sources of Motivation	Agree	51	25.5	0.61	2.12	Not sure
	Uncertain	122	61.0			
	Disagree	27	13.5			
	Total	200	100			

F= Frequency, %= Percentage, S.d= Stander deviation, M.S.= Mean of score “ Cut off point (0.66), Poor (mean of score 1-1.66), Fair (mean of score 1.67-2.33), Good (mean of score 2.34 and more)”.

**Table (2): Correlation between the study sample attitudes and their demographic Characteristics**

Demographic data	Scale	Overall Attitudes				$\chi^2$ obs.	d. f	$\chi^2$ crit.
		Agree	Uncertain	Disagree	Total			
Age (years)	15-20	7	46	2	55	23.229	8	15.507
	21-26	29	45	1	75			
	27-32	27	22	0	49			
	33-38	5	10	0	15			
	≥39	3	3	0	6			
	Total	71	126	3	200			
P-value= 0.003 →S								
Women educational Level	Not read and write	11	29	2	42	15.931	8	15.507
	Read & write	4	12	0	16			
	Primary school	22	44	0	66			
	Secondary school	6	16	1	23			
	Diploma & above	28	25	0	53			
	Total	71	126	3	200			
P-value= 0.043 →S								
Women occupation	Working	26	23	0	49	13.571	4	9.488
	Students	2	14	1	17			
	House wife	43	89	2	134			
	Total	71	126	3	200			
	P-value= 0.009 →S							

$\chi^2_{obs.}$  = Chi-square observer,  $\chi^2_{crit.}$  = Chi-square critical, Df= Degree of freedom, P-value= Probability value, S= significant, NS= non-significant, HS= high significant

### Discussion of Results

Results indicated that most of sample are within second age groups (19-22) years old these result correspond with results of study conducted in Niknafs Maternity Center in Iran to identify the knowledge and attitudes of women regarding modes of delivery by (Aali and Motamedi, 2005) <sup>(10)</sup> where their findings were (35.3%) of participant within (20-24) years as a high proportion. Concerning women education level and their occupation a (33.0%) with secondary school graduation while more than sixty percent are housewives as a high percentage these finding coincide with results of study carried out by (Hassan *et al.*, 2016) <sup>(11)</sup> to investigate the awareness and attitudes of pregnant women regarding anesthesia at labor where their results was (37.6%) with primary school and (79.0%) housewives women, also agree with results of study conducted at Al-Kadhumyia Teaching Hospital to identify the preference and knowledge of delivering mothers toward normal vaginal delivery and caesarean section by (Habib *et al.*, 2011) <sup>(14)</sup> where their results were (47.3%) with primary school and (87.4%) house wife as highest percentage.

Regarding the pregnant women monthly income, it is obvious proportion of (54.5%) were satisfied to some extent as a higher proportion this result agree with finding of study conducted to recognize the delivery mode and subsequent long-term sexual function of women with primiparous in Ankara by (Gungor *et al.*, 2007) <sup>(15)</sup> where their result represents (91.4%) for Somewhat satisfied as high percentage and supported by a study done by (Mbada *et al.*, 2014) <sup>(16)</sup> to recognize the attitudes and knowledge of pregnant women regarding exercise during antenatal period in Nigeria where their result were only (27.0%) is not satisfy about monthly income as highest proportion. Related residences the higher percentage was lived in urban area this result come in consistent with (Lilungulu *et al.*, 2016) <sup>(17)</sup> where they conducted a study to report the attitudes, knowledge and practice toward prenatal services for pregnant women in Tanzania the results revealed that majority of people of urban residency as a highest percentage while this result

disagree with the result done by (Hailu *et al.*, 2010) <sup>(18)</sup> to recognize the knowledge of pregnant women regarding obstetric danger signs in Ethiopia where the higher proportion were among rural area as (86.7%).

Finally in this table and regarding the husband educational level the higher percentage represents less than fifty participants husbands with primary school this result disagree with the study carried out by (Moosavi *et al.*, 2017) <sup>(19)</sup> to identify factors may influence in choosing method of delivery in Iran where the higher percentage was (33.3%) for husband with high school, while related the husband occupation the high percentage was (57.7%) free business these finding agree with (Aali and Motamedi, 2005) <sup>(10)</sup> where they find the higher percentage among free business husband (48.6%).

Regarding the prime pregnant women attitude toward normal vaginal delivery, the results in table indicate that the higher percentage of pregnant women (61.0%) were not sure in domain of (attitudes regarding personal and practical choice and sources of motivation), while the attitude were positive assessment in two domain (attitudes regarding NVD and attitudes regarding perceived behavioral control of NVD) these results agree with study done by (Nisar *et al.*, 2009) <sup>(20)</sup> who tested the knowledge and attitude and preferences method of delivery for pregnant women among those attended the antenatal clinics in Isra university hospital at Hyderabad city where their results indicated that majority of pregnant women (83.6%) who are included in the study had positive attitudes regarding vaginal delivery process, also the findings agree with the study done at Fatemiyeh hospital in Hamadan, Iran to assess the attitudes and knowledge of women regarding normal physiological delivery by (Masoumi *et al.*, 2014) <sup>(21)</sup> where they found that majority of pregnant women had moderate attitudes regarding physiological labor and delivery.

Results show that there is significantly relationship between demographic characteristic of pregnant women and their attitudes regarding normal vaginal delivery was found at p-value <0.05 except one item (residency) was non-significant relationship at p-value 0.414 these results agree with many studies, one of them conducted in Iran by (Bita *et al.*, 2014) <sup>(22)</sup> where the results indicated that there is a significant relationship between attitudes of

pregnant women and their demographical data regarding physiological labor and delivery process. Attitudes can be tested through people feelings toward the concepts of special concerning, they sometimes develop through individual experience.

### Conclusions

This study focus on clarify the attitude of prime pregnant women regarding normal vaginal delivery in southern of Babylon governorate at primary health care centers, the main conclusions of the study are the higher percentage of the study sample (39.5%) who participated in the study with age between (19-22), and most of them with secondary school as level of educations as highest proportion. The result show there was positive assessment in two domain of prime pregnant women attitude regarding NVD and another domain of attitude was not sure assessment.

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