



■ Original Research Article

Awareness And Desirability of Companionship in Labour Among Pregnant Women Attending Antenatal Clinic in Owo, South-West, Nigeria.

Saheed Yomi Adebayo¹, Olorunfemi Oludele Owa^{1,2,3}, Akinbowale Romance Eniowo¹, Abidemi Abibat Ogunro¹ Veronica Ibukun Salaja¹, Ramon Sunday Omotayo²

1.Department of Obstetrics and Gynaecology, Federal Medical Centre, Owo Ondo State; 2. Department of Obstetrics and Gynaecology, University of Medical Sciences, Ondo State; 3. Department of Pharmacology, University of Medical Sciences, Ondo State

ABSTRACT

Background: Labour is a stressful physical and psychological experience in a woman's life, requiring optimal coping mechanisms. Companionship in labour provides such needed support in this vulnerable moment of women. The presence of a companion of the woman's choice in labour improves her satisfaction with parturition. **General objective:** To determine the awareness and desirability for companionship in labour of pregnant women attending antenatal clinic at a tertiary centre in Owo, South-West Nigeria. **Methods:** An institutional based descriptive cross-sectional study of 292 antenatal clinic attendees in Owo. Participants were selected by systematic random sampling and data collected through interviewer-administered questionnaire, assessing their awareness and desirability for companionship in labour. The data was analysed using SPSS IBM version 24.0. **Results:** A total number of 292 pregnant women with mean age 31.8 years participated in the study. Most of the respondents (57.2%) were aware of companionship in labour, 88.7% had desire for companionship in labour though only 18% had companionship in their previous delivery (ies) or knew someone who had it before. All with companionship in their previous delivery (ies) were satisfied. Husband/partner is the most preferred companion in labour 64.4%. Majority (92%) desire to deliver their baby (ies) in a hospital where there is provision for a companion in labour. Most of those who desired to have their delivery at facilities with provision for companionship in labour (63.7%) would prefer it even at an additional cost of care. **Conclusion:** Companionship in labour is evidently the intense aspiration of parturients. Majority of the participants desired companionship in labour but its utilization is low. Permitting women to have a companion of their choice during labour and delivery can be a cost-effective intervention to improve the quality of maternal care with positive birth experience.

Corresponding contributor:

Dr. Olorunfemi O. Owa
Department of Obstetrics and
Gynaecology,
Federal Medical Centre, Owo
Ondo State.
owalorunfemi@yahoo.com
08037637532

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INTRODUCTION

Labour is a physiological process with intense physical and emotional challenges,¹⁻⁵ the presence of a birth companion is clearly linked to positive birth outcome^{6,7,8,9,10} Social support in labour has been found to significantly reduce the need for some interventions.^{11,12} Women have preference for intrapartum support, mostly, their spouse but some their mother, sister, mother in law or friends.^{10,13} Poor birth experience may contribute significantly to perinatal mental health.^{11,14} Companionship in labour is a non-pharmacologic method of pain relief in labour.¹⁵ In February 2018, the WHO published a consolidated set of recommendations on intrapartum care for a positive childbirth experience (labour care guide).^{14,15,16} Respectful maternity care and knowing the level of awareness and desirability for companionship in labour among antenatal attendees at this facility would guide in policy making as regards proper implementation of companionship in labour as recommended by WHO.^{14,15,17,18} This study was aimed to determine the awareness and desirability of pregnant women attending antenatal clinic for companionship in labour.

METHODOLOGY

Study Settings

This study was carried out at the obstetrics unit of a tertiary Centre, in Owo, Ondo state. It was an institutional based descriptive cross-sectional study of antenatal clinic attendees in Owo. Participants were selected by systematic random sampling and data collected through interviewer-administered questionnaire, assessing their awareness and desirability for companionship in labour. The study population consisted of women who had Antenatal Care (ANC) services in the hospital from January to March, 2024. Inclusion criteria was pregnant women accessing antenatal care services at FMC, Owo, irrespective of their gestational age, who consented to participate in this study. Any patient with contraindication to vaginal delivery or with any mental challenge was excluded.

Sample Size Determination

The sample size for the study was determined by Fischer's formula using the prevalence rate of 75% found in a study in Nigeria by Morhason-Bello *et al.*¹³

$$n = p(1-p)z^2/d^2$$

where n = sample size, z = Z_α for 5% α, d = desired error margin and p = prevalence.

Using prevalence of 75% and 95% confidence interval, d = 0.05, Z = 1.96, p = 0.75

Therefore, n = 0.75(1-0.75) x 1.96²/0.05²

n = 288.

The population size (N) is less than 10,000 (3300).

Therefore, the desired sample size (nf) will be calculated as; nf = n/1+n/N

= 288 / 1 + 288/3300 = 288/1 + 0.087 = 288/1.087

= 265.

Non-response rate of 10% of sample size (27) was added.

Thus, the minimum sample size used was 292 respondents.

Method of Data Collection

Data collection was through an interviewer administered questionnaire. The research assistants were trained on how to administer the questionnaires, how to tackle the questions that could arise during the interview and how to ensure the research ethics were strictly adhered to. The questionnaire consisted of the first part which had the socio-demographic characteristics of the participants while the second and third parts assessed the awareness and desirability of parturients on/for companionship in labour respectively.

Data Analysis

The data collected was analysed using IBM-SPSS (Statistical Package for Social Sciences) version 24.0 software. The data was presented in tables, bar charts, pie charts and histogram. Chi-square was used for categorical variables. The level of significance was set at ≤ 0.05.

Ethical Consideration

An institutional ethical approval for this study was obtained from the Ethics Review Committee of Federal Medical Centre, Owo. Participation in the study was voluntary and a written informed consent was obtained from each participant at recruitment into the study. All information and data obtained from the study were treated with confidentiality and used solely for the purpose of the study.

RESULTS

A total of 292 women participated in this study with mean age of 31.8 ± 4.65 years. Majority were married 97.3%. Concerning awareness of

companionship in labour, 57.2% were aware, 42.1% were not aware while 2 of them did not respond. Only 18% of those who were aware of companionship in labour experienced

Table 1: Sociodemographic Characteristics of Respondents

Variables	Freq (N)	(%)	Statistica l test (p-value)
Age Group			
< 20 years	4	1.4	1.10 ^a
21 - 30 years	134	45.9	(0.778)
31 - 40 years	148	50.7	
> 40 years	6	2.1	
Age in years – Mean ± SD	31.8 ± 4.65		0.30 ^b (0.765)
Marital status			
Single	6	2	0.36 ^a (0.547)
Married	284	97.3	
Widowed	2	0.7	
Religion			
Islam	166	56.8	0.33 ^a (0.553)
Christianity	124	42.5	
Traditionalist	2	0.7	
Level of Education			
No formal education	6	2.1	0.73 ^c (0.867)
Primary education	9	3.1	
Secondary education	64	21.9	
Tertiary education	213	72.9	
Occupation			
Self-employed	149	51	1.41 ^c (0.704)
Professionals	62	21.2	
Skilled workers	50	17.1	
Unskilled workers	5	1.7	
Unemployed	26	8.9	
Ethnicity			
Yoruba	224	76.7	0.80 ^c (0.669)
Hausa/Fulani	28	9.6	
Others	24	8.2	
Igbo	16	5.5	
Booking status			
Booked	262	89.7	1.24 ^c (0.403)
Unbooked	30	10.3	

^aFisher’s exact; ^bStudent’s t -test; ^cChi-square test

companionship in their previous labour and delivery. The booked patients were 88.2% of the studied population.

The association of the variables with desirability for companionship in labour was tested with chi square, parity (p-value = 0.008), religion (p-value 0.003), occupation (p-value 0.002), ethnicity (p-value 0.004) and level of education (p-value 0.0018) of the participants were statistically significant. Age and marital status of the respondents had no significant relationship with their desire for companionship in labour. Regarding preferred companions in labour among respondents; One hundred and eighty-eight (188) of those who desired companionship in labour, accounted for 64.4% of the respondents preferred their partner/husband as a companion in labour. Thirty-Three (11.3%) of them preferred their mother, 19 (6.5%) of them preferred their mother-in-law while 12 (4.1%) of them preferred their sibling/sister as a companion in labour.

Table 2. Awareness Of Companionship in Labour Among the Respondents

	Freq	%	Chi-square (p-value)
Awareness of companionship in labour	Yes	167	57.2
	No	123	42.1
Companionship in previous childbirth	I don't know	2	0.7
	Yes	30	18.0
	No	137	82.0

DISCUSSION

There is dearth of studies on companionship in labour in our setting despite being recommended by the World Health Organization as one of the components of respectful maternity care. Therefore, this study was set out to determine the awareness of companionship and desirability of pregnant women attending antenatal clinic in FMC, Owo for companionship during labour. Exploring the desire of pregnant women for birth companionship for their future labour and delivery is very important in order to make the health facility ready to accommodate those companions and even, it is important to create a positive impression on health care providers about those companions.^{18,19}

Table 3. Association Between Socio-Demographic Characteristics of the Respondents and Their Desirability for Companionship in Labour

Variables	YES		NO		Statistical test (p-Value)
	Freq	Percent (%)	Freq	Percent (%)	
Age					
≤ 20 years	4	1.37	0	0.0	
21 – 30 years	120	41.1	14	4.80	
31 – 40 years	129	44.20	16	5.48	
>40 years	6	2.05	0	0.0	1.226b (0.747)
Marital status					
Single	6	2.05	0	0.0	
Married	254	87.00	30	10.27	0.953b (0.621)
Widowed	2	0.7	0	0.0	
Parity					
0	47	16.10	16	5.48	
1-2	135	46.20	7	2.4	
3-4	75	25.70	14	4.80	
5 or more	2	0.7	2	0.7	15.611a (0.008) *
Religion					
Islam	139	47.60	27	9.25	
Christianity	118	40.41	6	2.05	
Traditional	2	0.70	0	0.0	11.974b (0.003) *
Occupation					
Unemployed	20	6.85	6	2.05	
Self-employed	127	43.49	22	7.53	
Unskilled	5	1.71	0	0.0	
Skilled	50	17.12	0	0.0	
Professional	59	20.21	3	1.03	17.505b (0.002) *
Yoruba	206	70.55	18	6.16	
Hausa/Fulani	20	6.85	8	2.74	13.523b (0.004) *
Igbo	13	4.45	3	1.03	
Others	20	6.85	4	1.37	
Level of education					
Primary	7	2.40	2	0.70	38.005b (0.0018) *
Secondary	50	17.12	14	4.80	
Tertiary	200	68.50	13	4.45	

*Statistically significant, ^a student t-test, ^b Chi-square

Table 4. Desirability For Companionship In Labour Among Respondents

Variables	Freq	Percent (%)	Chi-square (p-value)
Desirability for companionship in labour	259	88.70	
Yes			
No	30	10.27	11.52 (0.001) *
No response	3	1.03	
Desire for delivery at hospital with provision for companionship	268	91.8	
Yes			
No	24	8.2	
Desire for companionship in labour at additional cost	186	63.70	
Yes			
No	103	35.27	
No response	3	1.03	

Although the benefits and subsequently the promotion of support during labour and delivery has been noted in the past, most developing nations such as Nigeria, still practice it below expectation.¹³ This deprives women of cost-effective care in the course of their childbirth.^{2,20} This might be because of cultural background and poor architectural design of labour rooms in this environment which discourages companionship during labour and delivery.

This study found the level of awareness of companionship in labour among antenatal clinic attendees in FMC, Owo to be relatively high (57.2%). However, only 18% of those who had awareness of it had some forms of companionship in their previous childbirth. The result is similar to what was reported in a study from Ethiopia which showed only 13.8% of mothers utilized companionship during labour and delivery.^[21] The result from the index study as regards utilization of companionship during labour is low when compared with a study done in Saudi Arabia which found that 59% of women in labour had support during labour¹¹ and the one conducted in Denmark where 95% of women in labour had companions.¹⁰ This could be due to socio-cultural differences and better planned health care

facilities to accommodate companions during labour unlike in our environment where women labour mostly in open labour rooms without required privacy.

This study also found high desire for companionship in labour among the respondents (88.7%). This is similar to what was reported in a study from Abakaliki where 92% of the respondents desired for companionship in labour.²² Similarly, another study done at the University College Hospital, Ibadan, Nigeria reported that 75% of the respondents desired companionship in labour.¹³ This showed that Nigerian women desire companionship in labour, however, its utilization is low and efforts must be made to prevent depriving them of this important supportive care as recommended by the WHO.

In this study, most women preferred their husband/partner as labour companion (64.4%). The finding is similar to what was obtained from a study conducted in Abakaliki which reported that 67.25% of the respondents preferred their husband as companion in labour.²² However, the finding in this study is in contrast with what a study from Russia reported in which 68% of the women declined to have male partners present during labour.⁷ This difference may be individual, socio-cultural or societal perception of the role of male partners.^[16] It could also be due to difference in family structures, relationships and ties.

This study also found that majority of the respondents (92%) expressed desire to deliver their babies in a hospital with provision for companionship in labour. Most of these women would prefer to experience it even at an additional cost. This is in agreement with what was obtained from a study conducted in Abakaliki.²²

This study also revealed majority of the respondents (72.9%) had tertiary (post-secondary) level of education. Most of these women opted for companionship in labour. Although it is not unexpected that those more educated women opted for companionship in labour. Enhanced efforts should also be made to propagate the role and value of companionship to those who are less well educated. This is in agreement with other study which demonstrated that educational level of women was an important determinant.¹³

Ethnicity, parity and occupation of the respondents were also found to be statistically significant in this study similar to what was reported in other study.¹³ However, age and marital status of the respondents were not statistically significant in the desire for companionship in labour in this index study. This is in agreement with a study from Hong Kong.^[23] In contrast, the finding in this study contradicts what was obtained from a study from Abakaliki

where the age and parity were found to be statistically significant.²²

CONCLUSION

Companionship in labour is evidently the intense aspiration of parturients in our societies. Their desire to be in the company of their loved ones during one of the most stressful moments of their lives should be made a reality. The findings of this study showed that most of the respondents are aware of companionship in labour and majority of them desired it but its utilization is low. To improve this low utilization of companionship in labour, institutions and care givers should make provisions for it, provide information about it during antenatal care attendance as well as need for clear guidelines to govern its practice. Companionship of choice in labour is a cost-effective intervention to improve the quality of maternal care with positive birth experience.

Limitations of the Study

This study has some limitations. It is obviously one of the few of its kind on the subject matter and an eye opener at our facility to the wish of our women. This does not represent the opinion of the entire society. Most of the respondents who had companions in their previous delivery (ies) did so in facilities outside our facility (place of study). Therefore, a community-based study would be preferable.

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