Background

- In 2000, the United Nations developed the Millennium Development Goals (MDGs) in order to target poverty and health disparities globally. MDGs 4 & 5 are specifically related to improving maternal and child health. The World Health Organization (WHO) has recognized that nurses and midwives have great potential in addressing these issues.

- In order to target MDGs 4 & 5, the Pan American Health Organization (PAHO), the regional body of the WHO for the Americas, has formed partnerships with various universities and agencies in the Western hemisphere in a collaboration known as the Collaborative Partnership for Achieving Improved Maternal & Newborn Health in the Americas through Nursing and Midwifery. Included in this initiative is Emory University’s Lillian Carter Center for Global Health and Social Responsibility (LCC).

- Since 2008, Dr. Jennifer Foster, professor at Emory’s School of Nursing and faculty at the LLC, has partnered with Dr. Lorena Binfa, Director of the Midwifery School at the University of Chile in order to increase nursing and midwifery research in the Latin American and Caribbean region to work towards improving MDGs 4 & 5. The need for increased research exists, as there is currently little information on the roles of nurses and midwives in assisting with births. To continue Dr. Foster and Dr. Binfa’s initiative, our GHI study focused on collecting data to improve midwifery research in order to meet the established objectives. The project has brought more attention to the way health care workers treat patients in the maternity ward.

- With the knowledge obtained from the study, San Vicente de Paul will begin targeted improvement processes to address the issues patients had with the quality of care they received.

Objectives

- AIM I: Uncover the birth outcomes of women whose births are attended by nurses at Hospital San Vicente de Paul
- AIM II: Explore the perceptions of quality of care received from women whose births are attended by nurses at Hospital San Vicente de Paul
- AIM III: Explore the perceptions of quality of care provided from the perspective of health care workers at San Vicente de Paul

Participants and Methods

- Women were eligible if they were of Dominican nationality and were not planning on having an elective cesarean section. Additionally, they must have given birth at the hospital for a minimum of three hours of labor before giving birth. The study was divided into three sections: Birth Outcomes Data, Follow-up Quality Surveys, and Focus Groups.

- Birth Outcomes Data:
  - **Methods:** Our GHI team trained local research assistants on the agreed-upon procedures for the data collection and data monitoring from the delivery logs on the maternity unit. Upon obtaining consent, the team and research assistants recorded the necessary data using birthing logs and observations of the births.
  - **Sample:** Based on trends in births and data from previous birthing logs, our team anticipated an n of 87.

- Follow-Up Surveys:
  - **Methods:** Upon obtaining consent for the initial data collection in the hospital, contact information was also collected from mothers interested in the follow-up surveys and focus groups. A week after they have given birth, a GHI team member and a research assistant would call to schedule a home visit and an interview. The team member and research assistant then went to women’s houses using local transportation in order to conduct the survey. Their responses were then recorded and compiled into an Excel database.
  - **Sample:** Our team decided on an n of 55, based on our resources (both temporal and financial) and feasibility.

- **Focus Groups**
  - **Sample:** A total of seven focus groups were conducted; two will be with nurses (nursing assistants and registered nurses), and one with residents. The remaining four focus groups will be conducted with women who have given birth at the hospital.

Preliminary Results

- The birth outcome data indicates that about half the women who were enrolled in the study ended up giving birth vaginally and the other half via cesarean. The results of the surveys indicated that the women in the community felt that the health personnel that attended to them during their stay related to them well. The women also felt that they were allowed adequate time to be with their newborn and that the hospital equipment was functioning well.

- The women surveyed also felt that the cleanliness of the bathrooms and showers was not adequate for a hospital, they had to wait a long time to be attended by health care personnel, and during the stay they did not have an opportunity to eat when they were hungry.

- The preliminary results of the focus groups indicate a disparate view of quality in the hospital between women and health care professionals. Further examination of the focus groups will give more insight into the differences.

Conclusion

- The GHI project is considered a success. The team was able to work closely with partners in the community to meet the established objectives. The project has brought more attention to the way health care workers treat patients in the maternity ward.

- With the knowledge obtained from the study, San Vicente de Paul will begin targeted improvement processes to address the issues patients had with the quality of care they received.

Future Directions

- Collaborate with Chile and other countries where this study has been completed to guide our data analysis
- Disseminate the results and submit to a peer reviewed journal for publication, specifically the International Journal of Childbirth, which is the official journal of the International Confederation of Midwives
- Present the data and results to Hospital San Vicente de Paul in January 2014
- Present at the International Confederation for Midwives conference in Prague in June 2014

Advisors

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