

Respectful Maternity Care: A Right of Pregnant Women

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Every woman has the right to the highest attainable standard of health, including the right to dignified, respectful care during pregnancy and childbirth.¹ In every community and family, Pregnancy and childbirth are precious events in the lives of women. The concept of “Safe motherhood” is usually restricted to physical safety. Because motherhood is specific to women, issues of gender equality and gender violence are also at the core of maternity care. Thus, the notion of safe motherhood must be expanded beyond the prevention of morbidity or mortality to encompass respect for women’s basic human rights, including respect for women’s autonomy, dignity, feelings, choices and preferences including choice of companionship wherever possible.²

Broader health system constraints and limitations can contribute, directly or indirectly, to women’s negative experiences during childbirth. Overworked or undertrained providers, overcrowded or unsanitary facilities, or a lack of medical supplies make it challenging for health care providers to provide respectful, woman-centered care. A recent systematic review of the scientific literature documented an extensive range of mistreatment to which women are subjected during childbirth, including forms of physical, verbal, and sexual abuse; experiences of discrimination and neglect; and denials of privacy, confidentiality, and high-quality care.⁴ However, many forms of mistreatment remain unaddressed or inadequately analyzed under international human rights law.³

The below table highlights the categories of disrespect and abuse, the corresponding child bearing rights, examples and standard of care:

Types of Abuse	Examples	Child Bearing Rights	Standards of Care
Physical abuse	<ul style="list-style-type: none">• Pinching, slapping, pushing and beating• Undergoing unnecessary and extensive episiotomies and stitching episiotomy without anaesthesia• Being restrained or tied down during labour.• Being subjected to pushing on the abdomen to force the baby out, or excessive physical force to pull the baby out	Every woman has the right to be free from harm and ill treatment.	Staff conduct procedures devoid of physical harm. Patients are protected from emotional, physical and sexual injury.
Non consented care	<ul style="list-style-type: none">• No explanation of medical procedures, e.g., tubal ligation and hysterectomy	Every woman has the right to information,	Staff takes time to explain procedures, diagnosis, progress,

		informed consent and refusal	results and options.
Non confidential care	<ul style="list-style-type: none"> • Having to labour and deliver in view of others (without privacy barriers such as curtains) • Having health care workers share sensitive information such as patient's HIV status, age, marital status and medical history, in a way that other people can hear. 	Every women has the right to privacy and confidentiality	History taking & examinations done in as such privacy as possible. Women are never exposed unnecessarily. Staff does not discuss or disclose client information to non health care staff.
Non dignified care	<ul style="list-style-type: none"> • Use of non-dignified languages or speaking rudely or making threats. • Body exposed unnecessarily. • Unhygienic conditions: bed sharing, no changing linen/women asks to clean delivery tables/dirty toilets and bathrooms. 	Every women has the right to be treated with dignity and respect	Staff is polite and use appropriate language, gesture in communicating with clients. Use curtain and screen while examine the patient.
Discrimination	<ul style="list-style-type: none"> • Discrimination based on a women's race, ethnicity, age, language, HIV status, traditional beliefs and preferences, economic status or educational level. 	Every women has the right to equality, freedom from discrimination and equitable care.	Staff provides all the required services to all clients equally
Neglect/ abandonment	<ul style="list-style-type: none"> • Left alone during labour and not receiving any medical attention • Not being allowed to bring companion into birthing area. • Medical staff failing to monitor women in labour and intervene in life threatening situations. 	Every woman has the right to health care and to the highest attainable level of health.	Every pregnant woman in labour is attended by skilled person within 30 minutes of arrival a facility. Every woman in labour should be observed, delivered or referred within the guidelines upon the diagnosis.
Detention	<ul style="list-style-type: none"> • Retaining a mother and the baby in the facility when she is unable to pay 	Every woman has the right to liberty, autonomy, self-determination and freedom from coercion	Payment for health care services has to be based on the principal of equity, ensuring that these services are affordable for all.

We need to focus on the interpersonal aspects of care received by women seeking maternity services. A woman's relationship with maternity care providers and the maternity care system during pregnancy and child birth is vitally important. Women's experiences with care givers at this time have the impact to empower and comfort or inflict lasting damage and emotional trauma, adding to or detracting from women's confidence and self-esteem. Either way, women's memories of their childbearing experiences stay with them for a lifetime and are often shared with other women, contributing to climate of confidence or doubt around childbearing.

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