

Perception of Health Professionals of Midwife Role in Selected Palestinian
Hospitals: Implications for Health Policy



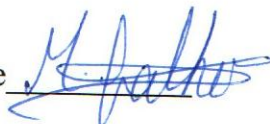
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Abstract

This is a descriptive survey study on the perception of selected health professionals of the role of the professional midwife in Palestine. The study was conducted between January 2005 and September 2006 in two major Palestinian hospitals; Makassed hospital in East Jerusalem and Ramallah Government hospital in Rammallah city- West Bank.

The study was meant to create baseline data that can guide senior midwives, health planners and decision makers in Palestine in planning, strategizing, and professionalizing midwifery so as to promote a change in the image of the profession in the eyes of co-workers within the health care system as well as the community at large. All the health professional in both hospitals as operationally defined for the purpose of this study were invited to participate totalling 380 all together. Data collection instrument was a pre-used questionnaire comprising two sections. The first presented demographic and background information on the respondent while the second addressed various aspects of four defined key role of the professional midwife. These are; care giver role, administrative role, educator role, and researcher role.

The results revealed a young study population; 35.0% were of the ages 26-30 years while 18.9% were within 36-40 years of age. A majority was; females (56.1%), graduated from Palestine (47.4%) and Arab world region (21, 3%). Almost half of the respondents had less than 5 years of experience compared to 36.8% who had 1-5 years of experience only. A majority was senior nurses (32.1%) and general practitioners (26.3%).

As per the midwife's four defined roles; on the care giver role, the majority of health professionals (97.3%) believe that it is very important that midwives have good technical skill. More than half of the health professionals (57.1%) perceive competence in judging physicians orders and protocols as insignificant matters in the practice of midwifery.

On the administrative role of the midwife, more than half of the responding health professionals do not perceive managerial skills as an integral part of midwifery role and so they do not see her in that role which presents a barrier to her assuming this role. While 95.1% of the respondents thought it is very important that the midwife works effectively

with the other midwives. Yet when it comes to assuming roles of managerial or leadership nature responses of positive connotation declined sharply.

On the educator role of the midwife, more than 80% of the total respondents expect the professional midwife to educate client in self care procedures while only around 45 % perceive and expect the professional midwife to have the ability to educate other midwives.

On the researcher role of the midwife, responses were fairly and variably dispersed. Around 51% of the respondents held an ambivalent position regarding the midwife's ability to collect data for monitoring midwifery care or participate in the design and implementation of midwifery studies at the national level. While only 31.6% of respondents thought it is very important that the professional midwife collaborates with health team members in research activities.

Crosstabulations by age, sex and job title revealed interesting relationships. Except for the care give role, highly significant relationships revealed between the age groups categories and the midwife's three roles with the administrative and researcher roles registering significance as high as ($p = .000$), and educator role registering the significance of ($p = .001$). By roles subdivisions differences registered high levels of significance including those under the care giver role.

By sex, overall females were in an evidently negative stand with regards to the four roles but most sharply the midwife's researcher role. Out of the 33.4% of those who saw this role extremely unimportant 22% were females and out of the 41.4% of those who held an ambivalent position about it another 22% were females.

By post title, senior nurses (12.2%) and residents (15.6%) seem to have high reservations about the midwife's administrative role while consultants, residents and senior nurses were the most sensitive to the researcher role of the midwife.

The results show that there are statistically significant relationships between health professionals' perception of midwives roles with regards to the post title held. So we accept the presence of a relationship between these two variables wherein sig. was .019 for care giver role, ($p = .000$) for administrative role, ($p = .001$) educator role, and ($p = .000$) for the midwives researcher role.

المخلص التنفيذي

هذه الدراسة هي دراسة وصفية حول وجهة نظر فئة محددة من المهنيين العاملين في القطاع الصحي لدور القابلة المؤهلة في فلسطين والكيفية التي يعرفون بها هذا الدور. تم تنفيذ الدراسة في الفترة الواقعة ما بين شهر كانون ثاني من العام 2005 وأيلول من العام 2006 في كل من مستشفى رام الله الحكومي ومستشفى المقاصد في شرقي القدس. اهتمت الدراسة ببناء قاعدة بيانات حول الموضوع قيد الدراسة لتمكين القابلات والمخططين وصانعي القرار في الجهاز الصحي في فلسطين من التخطيط المبني على البيانات الدقيقة التي تتيح تعريف القابلة كمهنة وإتاحة تغيير ايجابي في صورتها النمطية تحديدا كما يراها العاملون في القطاع الصحي وبالمجتمع كمحصلة.

استهدفت الدراسة جميع المهنيين الصحيين وفق التعريف الإجرائي الذي تبنته الدراسة والذين بلغ مجموعهم هل 380 فردا. ولغرض جمع المعلومات استعملت الدراسة أداة سبق استعمالها وتقيّنها، وقد اشتملت على جزأين رئيسيين. اولهما عني بالمتغيرات الديموغرافية والمهنية التعريفية ذات العلاقة والثاني تناول جوانب محددة للأدوار الأربعة للقابلة المؤهلة كما تعرفها الأدبيات ذات الصلة وهي: دور مقدم الرعاية الصحية والدور الإداري والدور التعليمي ودور الباحثة.

النتائج:

بينت النتائج أن مجتمع الدراسة مجتمعا شابا وقعت ما نسبته 35% من المجمل ضمن الفئة العمرية 26-30 سنة فيما بلغت نسبة أولئك الواقعون ضمن الفئة 36-40 سنة نسبة مقدارها 18.9%. وقد كانت الأغلبية من الإناث (56.1%) متخرجات من جامعات فلسطينية أو عربية، وقد بلغت عدد سنوات الخبرة الخمسة سنوات لما يقارب النصف فيما تراوحت بين 1-5 سنوات لما نسبته 36.8%. ومن حيث المهنة، فقد بلغت نسبة الممرضات المتقدمات 32.1% والأطباء المقيمون 26.3% من الإجمالي.

أما عن الأدوار الأربعة للقابلة، فحول دور القابلة كمقدمة للرعاية الصحية تعتقد الأغلبية (97.3%) بأن من المهم أن تملك القابلة مستوى عال من المهارات التقنية، فيما يرى ما يزيد عن النصف بأن الكفاءة العالية في الحكم على " أوامر الأطباء العلاجية" أو البروتوكولات أمور ليست ذات قيمة في الممارسة المهنية للقابلة.

وبالنسبة للدور الإداري للقابلة فإن ما يزيد عن النصف لا يرون أن المهارات الإدارية هي متطلب أساسي للممارسة المهنية لمهنة القابلة، ولذا فهم لا يرونها ضمن هذا الدور مما يعيق فرص ممارستها

لمثل هذا الدور. وفيما رأى 93.1% من المجيبين أن من المهم جدا أن تكون القابلة قادرة على العمل بفاعلية مع القابلات الأخريات بينما تدنت هذه النسبة بشكل لافت عندما تضمنت العبارة المطروحة دلالات قيادية أو إدارية.

أما عن الدور التعليمي للقابلة، يتوقع ما يزيد عن 80% من المجيبين أن تقوم القابلة المؤهلة بتعليم الأم طرائق ومهارات العناية بالذات فيما لم يزد من يعتقدون بقدرة القابلة على تعليم زميلاتهن القابلات عن 45%. وبالمقارنة، لا يرى ما نسبته 51% من المجيبين أهمية لأن تكون القابلة قادرة على جمع البيانات اللازمة لرصد ومراقبة جودة خدمة القبالة أو لمشاركتها في تصميم وتطبيق دراسات وطنية حول القبالة، فيما يرى فقط 31.6% أن هناك أهمية لأن تتعاون القابلة ضمن فريق صحي في الأنشطة البحثية ذات العلاقة.

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CHAPTER ONE

Introduction

1.1 Introduction

Midwifery is an important profession in health care delivery in Palestine despite the fact that midwifery human resources are severely limited and the role of the midwife is still lacking clear definition (Juzoor, 2005). This role is largely based on a number of skills, education, diagnosis, and intervention. The midwife assesses the needs of mother and child and plans her interventions accordingly to ensure the provision of quality care, whether at a stage of well-being, high-risk, or emergency. The midwife collaborates with the pregnant women and peer health care providers to ensure an optimum level of health for the woman and her baby. Midwives have a vital role in maintaining woman's health care by providing a range of services that includes; pregnancy, childbirth, normal newborns, family planning, and care of well woman (Palestine Council of Health, 1998).

Traditional role of the midwife in the majority population's countries is growingly changing to an administrative and supervisory one. Today midwives are participating in maternal health care, education, and research. The traditional relationship between the physician and midwife in which physicians personally prescribed, supervised and directed midwife activities is gradually fading away in many parts of the world. Nevertheless, many doctors still expect midwives to behave as obedient, reliant, and industrious workers rather than qualified professional equals. Partly, this explains the deteriorating maternal health profile across the globe but more sharply in the majority population countries.

It is believed that if the physicians' and other coworkers' perception of the role of midwife is understood, handicaps are captured and substantial improvements can be made towards the correction of the midwife/coworkers relationship contributing to the betterment of maternal child health outcomes as a fundamental area in public health. It remains also crucial to address the view other co-workers hold about the profession as they too play an influential role in promoting or hindering the professional development of midwifery as a growing career choice for many Palestinian women for this and coming generations.

1.2 Background & Significance

Midwives in Palestine have played an instrumental role in child birth and mother well being by assisting women in labor and delivery for centuries. Nevertheless, use of available midwifery services, most significantly at the community level but also in hospitals, has been in constant decline. Even though, as a result of the severely hampered access to health care facilities¹, the post *Intifada* era witnessed heightened awareness within the health care community for the need to redress midwifery practice and reinforce it by investing in available cadres so as to bring maternity services close to women in their local communities and establish maternity homes in marginalized areas with high population density. In its own right, this was a major policy step toward health system reform wherein the key role became the midwife's and not the physician. In spite of the tremendous national efforts invested in this project, utilization of maternity homes and midwifery services within them remained fairly humble. Women still preferred to give birth in hospital settings and receive care from a physician despite impediments.

This is owed to a number of reasons. A major one is that the medical lobby in maternal health care is so strong that any element of competition is taken as a threat. A well-qualified midwife as a specialist in normal obstetrics is seen as a rival because she is more accessible to the community in many ways including financially. And so training of midwives does not receive priority in the health care plans formulated and dominated largely by the medical profession. Another equally important reason is the prevalent cultural norms and the gender roles definitions within them, which trust and authorize 'capable' males- as physicians in this case- for what is perceived as difficult and significant tasks such as childbirth.

The PCBS-2004 Demographic and Health survey data indicates that the total number of qualified midwives in Palestine is 436 midwives (1: 100.000 populations). Within the three years preceding the PCBS national survey, of the total deliveries, 66.4% were attended by a physician compared to 25% and 6.9% that were attended by a nurse and a midwife, consecutively. By locale, rural communities made best use of midwifery

¹ Among the many aggression measures Israeli occupation has put in place were sieges, separations and closures of Palestinian cities, towns, villages and camps. So what used to be a ten minutes walk health care facility easily became completely out of access for many population groups and in many Palestinians communities.

services probably because this is where the maternity homes are located. More than 11% of deliveries in rural communities were attended by a midwife compared to 55.8% and 30.5% that were attended by a physician and a nurse, consecutively (PCBS-2004). By educational level, data showed that the higher the educational level of the mother is the more she tends to opt for her delivery to be attended by a midwife on the account of those attended by a physician. The mode of change in the birth attendees interestingly shows the midwife/physician dichotomy in this.

Alongside, it was widely observed that compared to international standers, most births in Palestine are carried out using abnormal methods. Wide usage of vacuum birthing and cesareans section were noted, particularly to first deliveries whose attendees are physicians in 75% of the cases. What can also be observed from that same data is that, for a much lesser extent, nursing contributes to the midwifery disadvantaged position by assuming the role of birth attendance of substantial percentages of deliveries (PCBS, 2006). This could be due to the historical overlap between the two professions having shared the professional origin and gender of provider for quite a good while.

One basic argument this study advocates is that future maternity services development is strongly connected to midwife-physician relationship as well as other coworkers. The perception of these health professionals hold of midwifery role can be a contributing/deterring factor to maternal outcomes and thus maternity services. Naturally, perceptions individuals hold of certain matter stem in the norms prevailing the society and culture they come from. In the Palestinian collective memory a midwife holds the image of the granny traditional birth attendant who is usually an uneducated old woman. Even though this image is not applicable anymore, yet, uprooting it from the Palestinian mentality including of those working in the health sector requires a lot of time and work at the socio-cultural (public) and sectoral (health system) level. This is especially hindered by the image people within the health care system (co-workers) hold, especially physicians who are in a particularly advantaged position to delay and even completely hamper any progress of the profession had their perception of it been a negative one. Not to forget, the obstetricians who are even more influential in the system and are particularly interested in perpetuating such a negative picture for the conflict of interest inherent in a well established appropriately seated professional midwifery body.

Evidence in literature shows that interpersonal relationships and communication between midwives and physicians specifically and other co-workers generally facilitated by providing midwives with information on how health professionals within various roles and capacities perceive the role of midwives, which, in turn holds an indication on the professional space potentially available for midwives to take up. This, in turn, is expected to aid midwives in Palestine in formulating future strategic plans for tackling issues of knowledge dissemination and exhibit aspect of the professional midwives expanded roles in clinical practice, administration and community interventions.

1.3 Problem Statement

In Palestine, as yet, no significant data about the perception of various health professionals of the midwifery role exist. This study will create a baseline data that can guide senior midwives in Palestine in planning, strategizing, and professionalizing midwifery so as to promote a change in the image of the profession in the eyes of co-workers within the health care system as well as the community at large. In turn, this is expected to reflect positively on their relationships with co-workers within the realm of maternal health, but particularly with doctors with whom the practice requires most contact, communication, and cooperation. To this end, it is imperative that relevant policies within the health care system are redressed and current status of midwifery is understood. Outlining the problems encountered by the profession, prime aspects are summarized in the followings;

- Lack of recognition of midwives' contribution to maternal health is deeply rooted in the Palestinian health establishments, system and culture.
- At the health system level, so far there is no clear job description for midwives. This is true for those working in the government and nongovernmental sector.
- As a result, some tasks which are located within the domain of midwifery are assumed by physicians and obstetricians, and vice versa.
- There is a serious overlap between nursing and midwifery to the extent that within the health care system there is an inclination to use interchangeably in care provision, particularly given the shared gender of the enrollees in both professions.
- Less qualified midwives are not adequately equipped with the needed assertiveness and communication skills. They are also unaware of the boundaries, magnitude and scope of practice in the profession.

- Appropriately qualified midwives are extremely limited in number and highly hampered and unacknowledged by the system.
- This has hit the perception of the profession and thus its image in the eyes of co-workers and community at large.
- Furthermore, interest in the profession continues to decline, particularly among younger generations of graduates.
- This has resulted in a serious lack of documented body of knowledge on the midwifery profession including the Palestinian physicians and obstetrician perception of the profession and due roles.

1.4 Purpose of the Study

This study aims to collect basic descriptive information regarding the perception of; Health professionals of Midwife Role in Selected Palestinian Hospitals. These are; Maqassed Hospital in East Jerusalem and Ramallah Governmental Hospital in Ramallah.

1.5 Research Questions

- How the health professionals perceive the professional midwife role as a care giver, behavior & qualities?
- How the health professionals perceive the professional Midwife role as Administrator, behavior & qualities?
- How the health professionals perceive the professional Midwife role as educator, behavior & qualities?
- How the health professionals perceive the professional Midwife role as, Researcher & qualities?

1.6 Specific Objectives

- To study various characteristics and background aspects of Health professionals including; specialists, residents, and nurses.
- To sensitize investigated co-workers perception to the expanded role of midwives in practice, research, education and administration.
- To establish means for bridging the gap between Midwives and other Health professionals.

1.6 Assumptions

The study is based on the following assumption.

- The majority of senior midwives are interested in this study.
- The majority of physicians, obstetricians and nurses will cooperate in responding to the questionnaire.
- Physicians, in particular, are graduates of different countries and thus hold quite diversified schools of thought concerning midwifery role.
- Hospital administrators will be cooperative and allow the researcher to interview physicians, obstetricians, and nurses.
- It is relatively easy to reach selected hospitals.
- The majority of the participants will respond to the data collection instrument in an honest manner.

1.8 Limitations of the study

1. The study cannot be generalized to all West Bank areas given the nonrandom sample selection method.
2. There are limited resources and in this field of research.
3. Lack of midwifery researches in the West Bank.

1.9 Clinical settings of the study

1.9.1 Makassed Islamic Charitable Hospital

Makassed Islamic Charitable society was officially established in 1956. It is a Palestinian non-profit, non-governmental organization that provides diversified human services and extends its services in accordance with its bylaws indifferently to all people regardless of color , religion ,creed ,or political belief .

CHAPTER FIVE

Results

5.1 Introduction

This chapter presents the result and analysis of the data. These results reflect the health professional perception of midwives role and core of practice.

The first section of the questionnaire presents the participants characteristics information of subjects involved in the study including; age, sex, country of graduation, type of employment, permanent resident and place of employment. The relationship between selected characteristics data and health professional's perception were explored by using one way ANOVA.

The second section of questionnaire presents the response of health professionals related to their perception of the professional midwife roles and core of practice segregated in four major areas. These are; care giver role, administrator role, educator role and researcher role.

5.2 Presentation of the result

The presentation of data highlighted the health professionals' perception of midwifery in Palestine in relation to their characteristics.

5.3 Analytical area number one: Background and Respondents characteristics

Table 5.1: Distribution of respondents by sex and employment setting

Employment setting	Sex		Total
	Male	Female	
Ramallah hospital	57	104	161
	15.0%	27.4%	42.4%
Makassed hospital	110	109	219