Letter to Editor

Childbirth Rights for Pregnant Women: Success for Poland and Inspiration for Other Nations

Dear Editor,

The World Health Organization (WHO) and other stakeholders have time and again envisaged for the right to attain the highest standard of health among women worldwide, including the right to have a dignified and respectful care, which is free from violence and discrimination, both during pregnancy and at the time of childbirth.^[1] However, across the globe, most of the women have been repeatedly exposed to a disrespectful, abusive, or neglectful behavior during childbirth in the health-care establishments.^[1,2] These unethical practices have significantly compromised the rights of women, facilitated lack of trust between women and health-care providers, discouraged women from utilizing antenatal and intranatal health-care services, resulted in adverse consequences for both mother and infant, eventually affecting the quality of life of women.^[2,3]

Even though, disrespectful behavior is prevalent throughout the antenatal, during birth and in the postnatal period, most of the women are extremely susceptible at times of childbirth (viz., physical or verbal abuse, embarrassment, performing forceful medical procedures such as episiotomy/sterilization, no privacy or confidentiality, obtaining no informed consent, refusal to either admit or administer pain medications, not allowing the presence of spouse/family members during childbirth, neglecting women during childbirth resulting in life-threatening complications, not discharging women and their newborns from hospitals owing to the inability to pay, etc.).^[1,4] In fact, women who are adolescent, unmarried, lower socioeconomic class, migrants, and living with HIV are generally more vulnerable for a disrespectful and abusive treatment from the health-care providers.^[1,4,5]

Pregnant women residing in Poland have successfully won the childbirth rights owing to a nationwide campaign started 20 years back.^[6] However, before this initiative, none of the women had the right to choose how they gave birth, no support by the spouse in the delivery room, and were not even allowed to share a room with their newborns due to which exclusive breastfeeding prevalence was quite low.^[6] This campaign and nationwide implementation of perinatal and postnatal care standards in 2011 did a lot of good things such as providing a platform to all the women to share their childbirth stories/concerns; ignited the need for respectful maternal care among women; guiding expectant parents to select the hospital to deliver their child; major reforms in the health system; restriction to not allow spouse in the delivery room was abolished; ensured that women can practically exercise their rights at time of

childbirth (viz., to select the place and mode of delivery, to decide the companions in delivery room, and to be with her child after 2 h of birth); visitors can be allowed to meet mothers; devised a mechanism to monitor the quality of care for both women and child through a Hospital Assessment Tool; significant reduction in infant mortality rates; and improvement in rates of breastfeeding.^[1,6]

Globally, it is very important to understand that like any other person, even pregnant women possess the right to be equal in dignity, have freedom to seek, receive, and impart information, not exposed to any kind of discrimination, and to attain the maximum standard of health.^[7] Despite the availability of definitive evidence suggesting incidences of disrespect and abuse during institution-based childbirth, there is no uniform definition or a tool to quantify it.^[1,2,5] This can be partly attributed to the absence of the comprehensive national policies (existing policies are either nonspecific or not implemented in a meaningful way), the insensitive nature of health workers, and no realization among health professionals about the adverse consequences of such disrespectful behaviors.^[5,8]

In fact, the WHO has revealed its commitment to promote women's rights and to facilitate access to safe, timely, respectful care at times of childbirth.^[1] In addition, interventions such as ensuring greater support from the policy makers and other stakeholders to encourage further research and action on disrespect and abuse; planning, implementing, and supporting those strategies which can improve the overall quality of maternal health care, so that dignified and respectful care can be rendered; creating awareness among women about the rights of women to have a dignified, respectful health care throughout pregnancy and childbirth; devising a mechanism to generate data pertaining to respectful and disrespectful care practices; and involving all the stakeholders, including women, can play a crucial role in both prevention and elimination of disrespect and abuse during institution-based childbirth worldwide.^[1,5,7,8]

To conclude, to raise the standard of respectful care during childbirth, there is an indispensable need to organize the health system and involve the concerned stakeholders, so that women can enjoy their labor and is felt more as a family and intimate event rather than an unpleasant memory. Poland has set an example, and it is the responsibility of other nations to follow them and achieve dignity for women during childbirth.

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There are no conflicts of interest.

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References

- World Health Organization. The Prevention and Elimination of Disrespect and Abuse during Facility-Based Childbirth; 2015. Available from: http://www.apps.who. int/iris/bitstream/10665/134588/1/WHO_RHR_14.23_eng. pdf?ua=1&ua=1. [Last accessed on 2015 Aug 05].
- 2. Silal SP, Penn-Kekana L, Harris B, Birch S, McIntyre D. Exploring inequalities in access to and use of maternal health services in South Africa. BMC Health Serv Res 2012;12:120.
- Bohren MA, Hunter EC, Munthe-Kaas HM, Souza JP, Vogel JP, Gülmezoglu AM. Facilitators and barriers to facility-based delivery in low- and middle-income countries: A qualitative evidence synthesis. Reprod Health 2014;11:71.
- Bowser D, Hill K. Exploring Evidence for Disrespect and Abuse in Facility-Based Childbirth: Report of a Landscape Analysis. USAID/TRAction Project; 2010.

- 5. Freedman LP, Kruk ME. Disrespect and abuse of women in childbirth: Challenging the global quality and accountability agendas. Lancet 2014;384:e42-4.
- World Health Organization. Raising the Voices of Pregnant Women in Poland; 2015. Available from: http://www.who.int/features/2015/ childbirth-dignity-poland/en/. [Last accessed on 2015 Aug 08].
- United Nations General Assembly. Technical Guidance on the Application of a Human Rights Based Approach to the Implementation of Policies and Programmes to Reduce Preventable Maternal Morbidity and Mortality; 2012. Available from: http:// www2.ohchr.org/english/issues/women/docs/A.HRC.21.22_en.pdf. [Last accessed on 2015 Aug 08].
- Warren C, Njuki R, Abuya T, Ndwiga C, Maingi G, Serwanga J, et al. Study protocol for promoting respectful maternity care initiative to assess, measure and design interventions to reduce disrespect and abuse during childbirth in Kenya. BMC Pregnancy Childbirth 2013;13:21.

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