

RESPECTFUL MATERNITY CARE

Amy Hawley, MSN, RNC-OB, C-EFM

LEARNING OBJECTIVES

- Recognize the Impact of Racism, Discrimination, and Bias
- Discuss Equality, Equity, Justice, Diversity, and Inclusion
- Outline Social Determinants of Health
- Define Respectful Maternity Care and Key Recommendations
- Understand Benefits Regarding the TeamBirth Approach



WELCOME TO MATERNAL AND NEONATAL NURSING!

- Family is family
- Everyone is an individual
- Nurses promote and advocate for protection of the rights, health, and safety of maternal and neonatal patients
- Birthing persons and their families want to be involved in decision making
- The wellbeing of one is the responsibility of all
- You are here because you care!



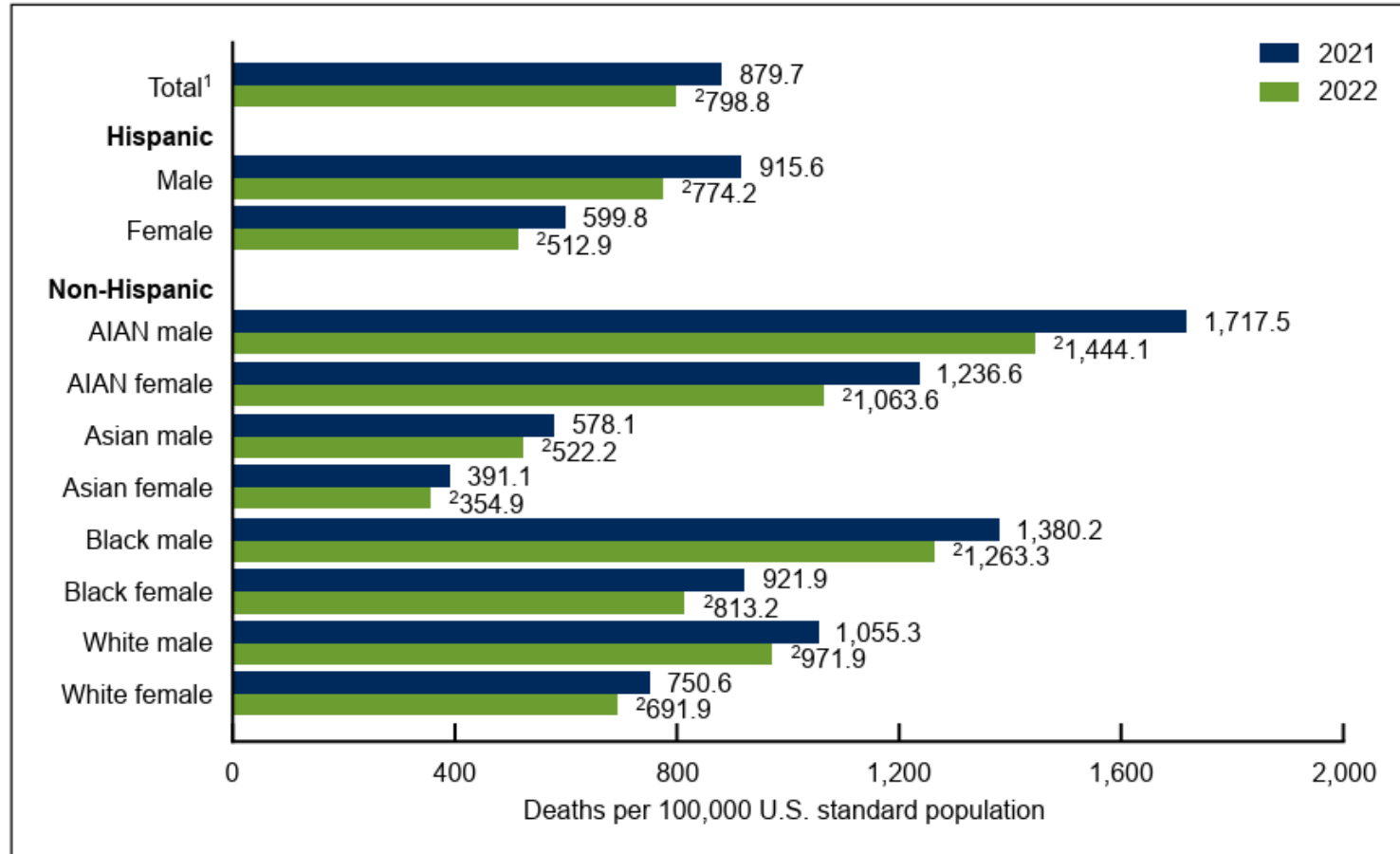
WHY OUR AREA IS SPECIAL ♥

- “I love being a part of monumental moments of a woman’s life. Even on the hard days, being their nurse leaves a permanent mark- on them & you.”
- “Attending deliveries and advocating for newborns is very rewarding. Watching, teaching, and helping first time parents learn their new role in life and adapt to such a wonderful change is a privilege.”



IMPACT DATA-IMPORTANCE OF EQUITY

Figure 2. Age-adjusted death rate, by race and Hispanic origin and sex: United States, 2021 and 2022



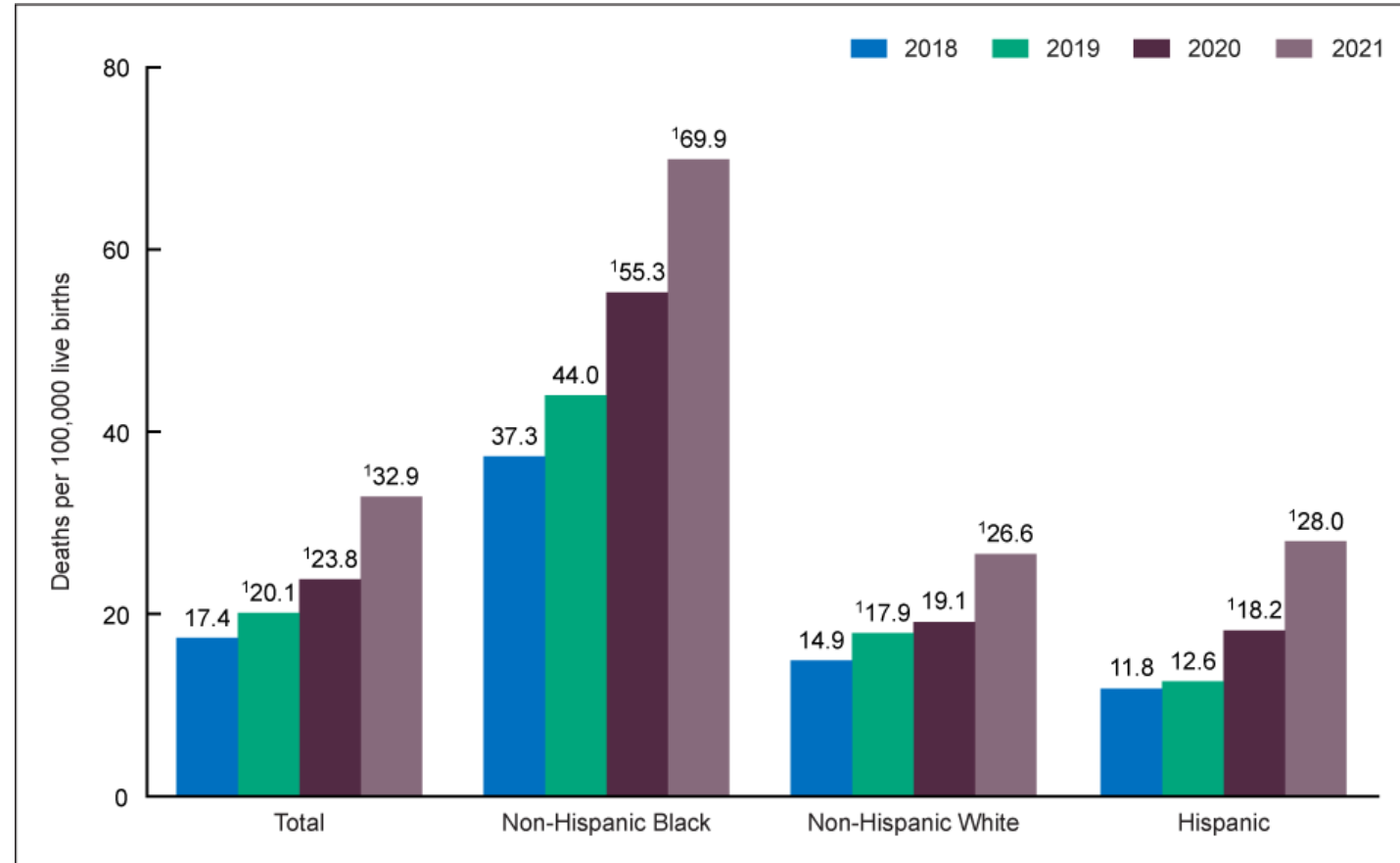
¹Includes races and origins not shown separately.

²Statistically significant decrease from 2021 to 2022 ($p < 0.05$).

NOTES: AIAN is American Indian and Alaska Native. Race groups are single race. Data by race and Hispanic origin are adjusted for race and Hispanic-origin misclassification on death certificates. Adjusted data might differ from data shown in other reports that have not been adjusted for misclassification. Access data table for Figure 2 at: <https://www.cdc.gov/nchs/data/databriefs/db492-tables.pdf#2>.

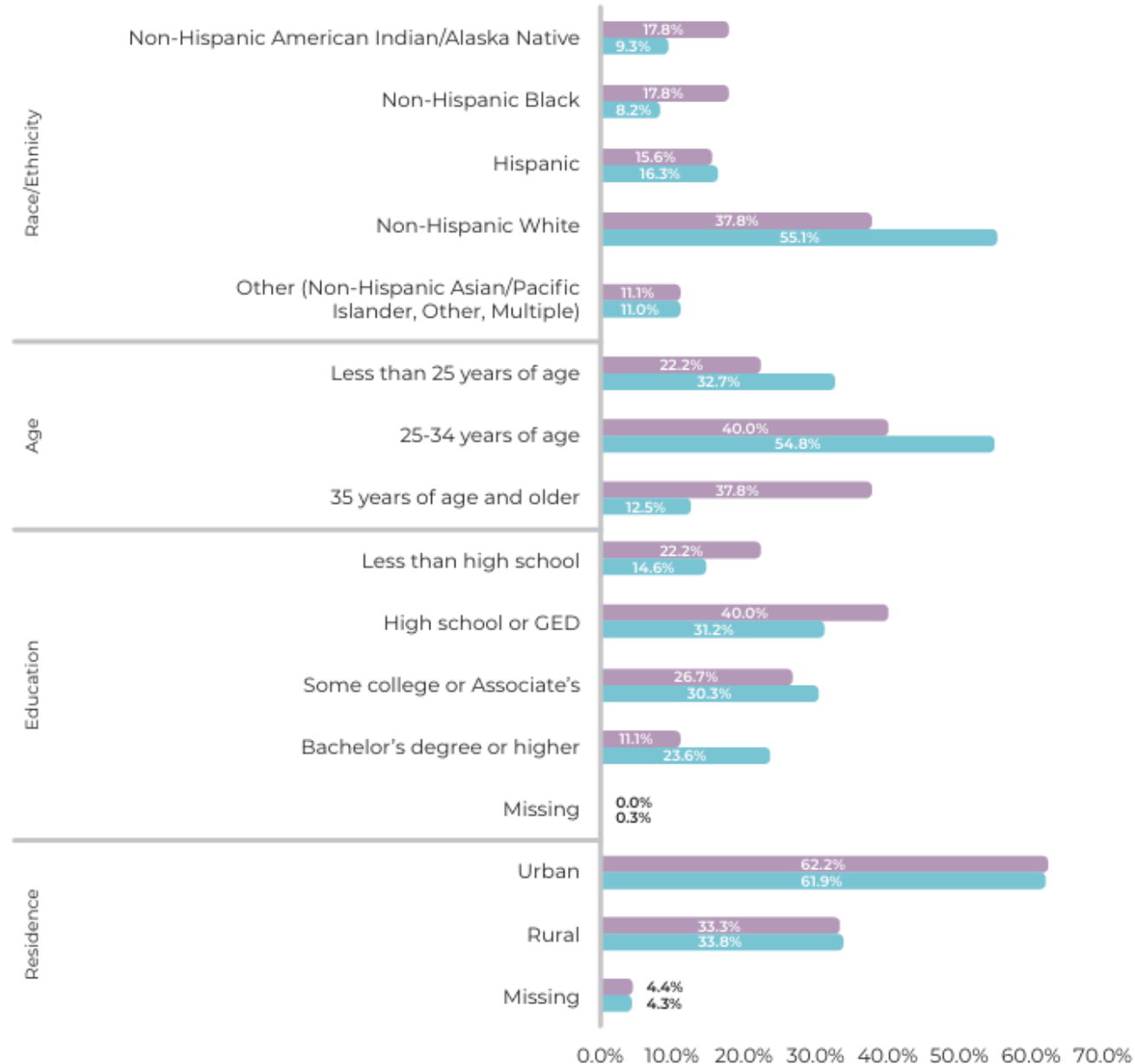
SOURCE: National Center for Health Statistics, National Vital Statistics System, mortality data file.

IMPACT DATA-IMPORTANCE OF EQUITY



¹Statistically significant increase from previous year ($p < 0.05$).
NOTE: Race groups are single race.
SOURCE: National Center for Health Statistics, National Vital Statistics System, Mortality.

Chart 8: Demographic Characteristics of Maternal Deaths and Live Births, Oklahoma 2019-2021



Source: Oklahoma Vital Statistics, 2019-2021

Maternal Deaths Live Births

DISCRIMINATION AND BIAS



WHAT ARE THE EFFECTS OF RACISM ON OVERALL HEALTH?

Poorer Sleep

Cardiovascular Disease

Higher BMI and Obesity

Inflammation

Psychiatric Disorders

- depression
- anxiety disorders
- post-traumatic stress disorder
- eating disorders
- psychosis

Coronary Heart Disease

High blood pressure

Stress Hormone Deregulation

MEDICALNEWS TODAY

WHAT IS EQUALITY, EQUITY, & JUSTICE?

Equality



The assumption is that **everyone benefits from the same supports**. This is equal treatment.

Equity



Everyone gets the supports they need (this is the concept of "affirmative action"), thus producing equity.

Justice



All 3 can see the game without supports or accommodations because **the cause(s) of the inequity was addressed**. The systemic barrier has been removed.

SOCIAL DETERMINANTS OF HEALTH

- Education Access & Quality
- Health Care & Quality
- Neighborhood and Built Environment
- Social and Community Context
- Economic Stability

The Path to Achieving Health Equity

What social and economic factors must be addressed on the continued path to achieving Health Equity?

The diagram features a central light blue circle with the text "HEALTH is affected by". Eight arrows radiate from this center to eight surrounding white circles, each containing an icon and a label. The labels are: "Discrimination/Minority Stressors" (with an equals sign icon), "Food Security and access to healthy foods" (with a red apple icon), "Stable Income & Job Security" (with a green dollar sign icon), "Environmental Quality" (with a grey cloud icon), "Neighborhood Conditions" (with an icon of a person and a child), "Quality Affordable Healthcare" (with a white bandage icon), "Educational Opportunities" (with a blue graduation cap icon), and "Housing" (with a black house icon).

Health Equity aims to ensure that all people have full and equal access to opportunities that enable them to lead healthy lives.

The Health Equity Institute
<http://healthequity.sfsu.edu>
1600 Holloway Avenue, HSS 359
San Francisco, CA 94132
P: 415-405-2540

HEALTH EQUITY INSTITUTE
for Research, Practice & Policy

SAN FRANCISCO STATE UNIVERSITY

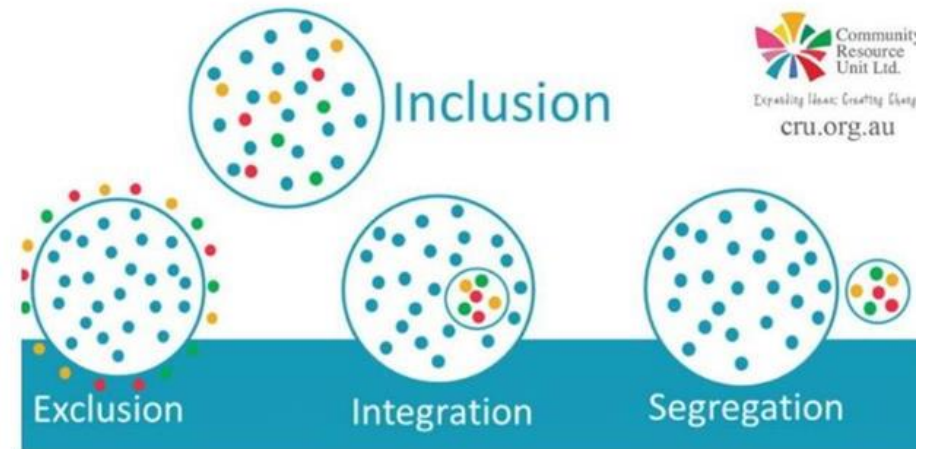
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DIVERSITY AND INCLUSION



DIVERSITY

diversity is less about what makes people different—their race, socioeconomic status, and so on—and more about understanding, accepting and valuing those differences



INCLUSION

inclusion is the extent to which various team members, employees, and other people feel a sense of belonging and value within a given organizational setting

DIVERSITY, EQUITY, & INCLUSION

AWHONN Inclusion Statement

AWHONN COMMITS TO: Be active champions for diversity, equity, and inclusion (DEI) through a strong organizational commitment, proactive leadership, and well-defined actions with an overarching goal of equitable and respectful care for all.



RESPECTFUL MATERNITY CARE (RMC)

- Definition: Respectful maternity care is a multidimensional concept that encompasses basic rights, such as bodily autonomy and dignity.
- Positive birth experience: being safe and ensuring psychological well-being
- Providing quality care standards and protection of human rights in childbirth are essential to optimizing childbirth outcomes.



RMC RECOMMENDATIONS

1

- Awareness

2

- Mutual Respect

3

- Shared Decision Making/Informed Consent

4

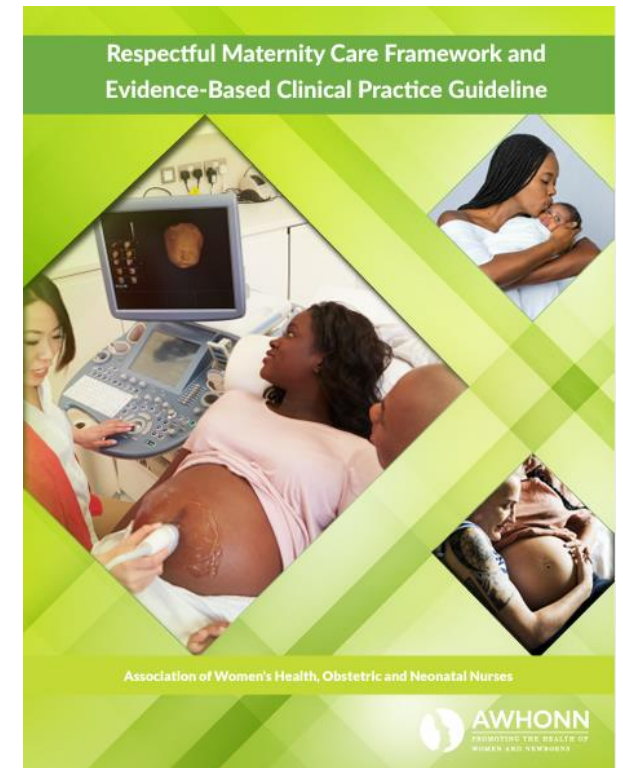
- Autonomy

5

- Dignity

6

- Accountability



RMC PART 1

Awareness

- Your views & my views
- Bias
- Your experiences my experiences

Mutual Respect

- Preference plan
- Patient centered communication
- Empowerment

Shared Decisions/
Informed Consent

- Provide education
- Document consent or refusal
- Provide support

RMC PART 2



Autonomy

Dignity

Accountability

- Self-governed decisions
- Neutral language
- NO coercion

- ALL patients have worth
- Protect privacy
- LISTEN and PROVIDE

- Educate
- Create a culture of accountability
- Formalize

FIGURE 2 AWHONN RESPECTFUL MATERNITY CARE FRAMEWORK

AWHONN Respectful Maternity Care Framework



TEAMBIRTH

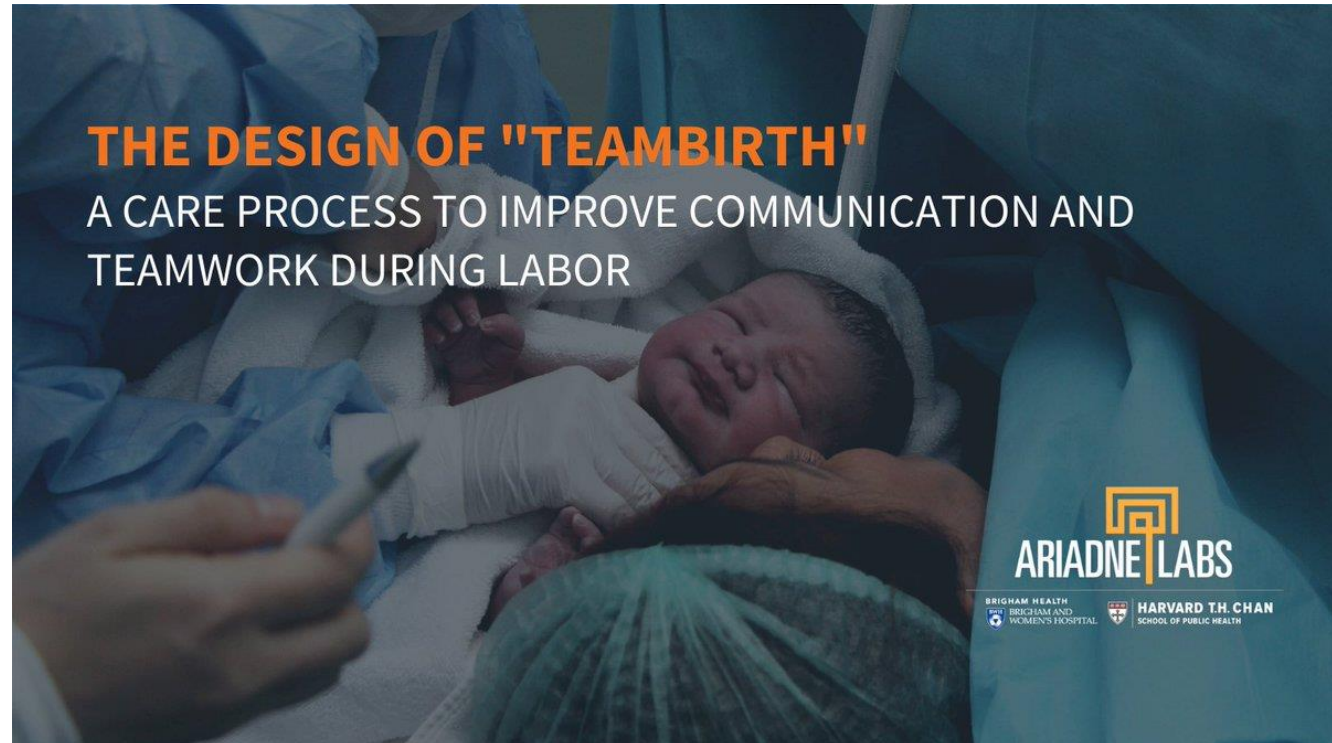


TEAMBIRTH

What is TeamBirth?

Who developed TeamBirth?

Why TeamBirth?

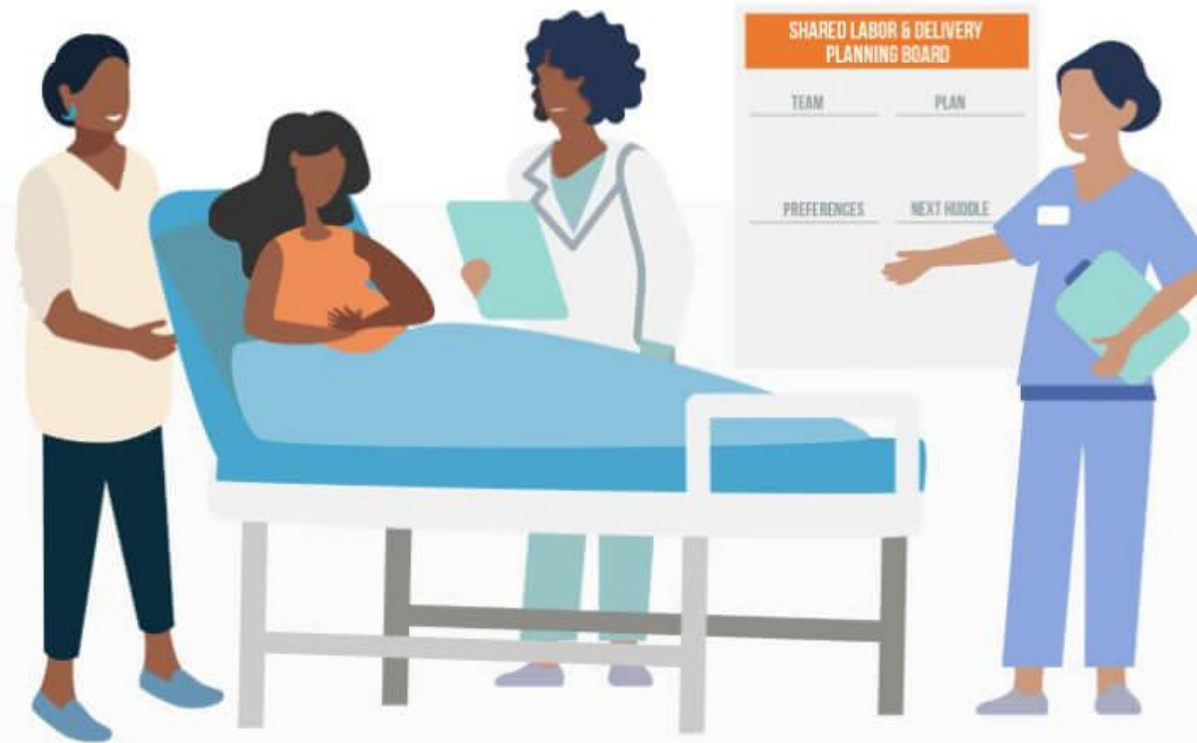
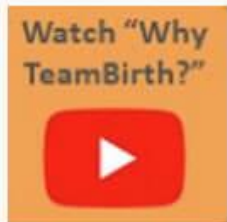


TEAMBIRTH-HOW IT WORKS

1. TEAM HUDDLES

2. SHARED PLANNING BOARD

Components which are critical to the successful delivery of the intervention



Team meetings with all participants

<https://youtu.be/SZvEYr3YwjM?list=PLRvEM6DQj4YrBjd18cOAHQ-zkdEFc3LTr>

TEAMBIRTH-HOW IT WORKS

Labor and Delivery Planning Board	
TEAM	PLAN
	Mom:
	Baby:
	Labor Progress:
PREFERENCES	NEXT ASSESSMENT
	EARLY LABOR ACTIVE LABOR PUSHING

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TEAMBIRTH-HOW IT WORKS

Assessing patient autonomy in the context of TeamBirth, a quality improvement intervention to improve shared decision-making during labor and birth

Evaluating patient autonomy after implementing **TeamBirth**, a QI initiative using team huddles to **improve shared decision-making during childbirth**

TEAMBIRTH

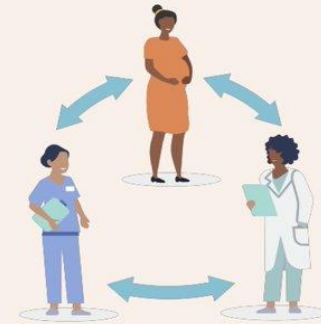
Surveyed patients about birth experience at four U.S. hospitals using maternal autonomy scale (MADM)

TeamBirth huddles associated with **higher self-reported maternal autonomy**

- **3.13-points higher** for at least 1 huddle
- **3.64-points higher** for 6+ huddles compared to 1



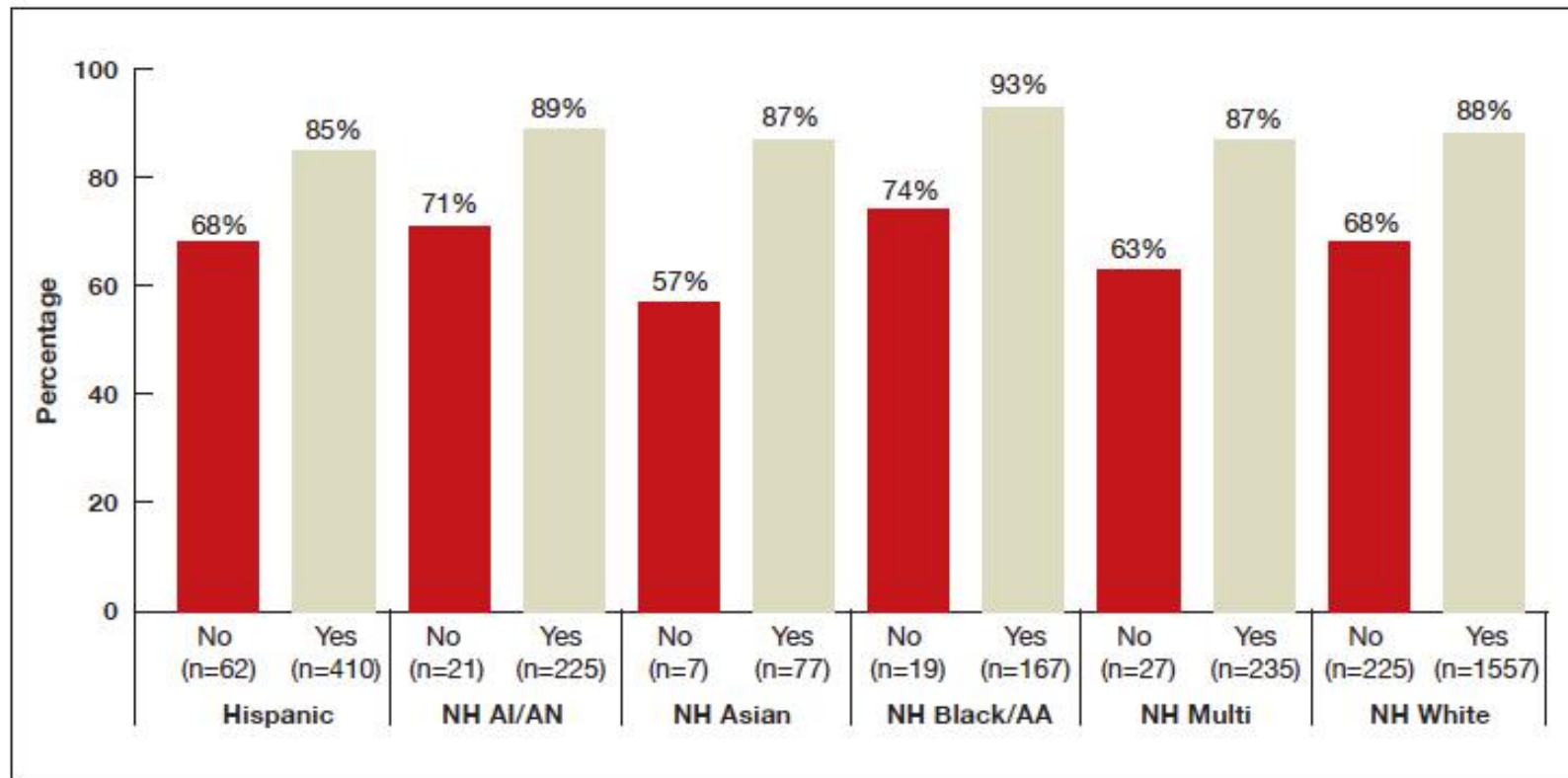
TeamBirth was significantly associated with **increased shared decision-making**



MADM can be a patient-reported experience measure for QI initiatives

TEAMBIRTH- DATA/EXPECTED OUTCOMES

FIGURE 2 Patient autonomy scores were higher in huddle participants



In a cohort of hospitals in Oklahoma, patients completed the Mothers Autonomy in Decision Making (MADM) validated survey. High autonomy scores reflecting the top quartile of responses are shown, differentiated by patient-reported race/ethnicity. The red bar represents patients who did *not* report participating in a TeamBirth huddle while the tan bar represents patients who did report participating in a TeamBirth huddle. Across racial and ethnic identities, the percentage of patients scoring in the highest MADM quartile was 31.3% higher for patients who reported participating in a huddle during labor compared with those who did not participate in a huddle.

Abbreviations: AA, African American, AI/AN, American Indian/Alaska Native, NH, non-Hispanic.

CELEBRATE!

TEAMBIRTH RECOGNIZED



QUESTIONS?



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