Measuring disrespect and abuse during childbirth in Kenya

Charlotte Warren on behalf of the Heshima Project  Kenya
May 2nd 2013
Certainly not every woman seeking care experiences disrespect and abuse (D&A)—but we can all agree any incident of inhumane treatment during childbirth is too much.

- No one deserves to be treated this way.
- No woman should experience being hit or shouted at - especially in childbirth.
13 health facilities

- 3 Referral hospitals
- 4 District/sub district hospitals
- 3 Private hospitals
- 1 FBO hospital
- 2 Health centres
Research Methods

1. Policy and governance
   - In depth interviews with senior RH program managers/civil society leaders

2. Health facility assessments
   - Facility inventories
   - Structured observations of labour and deliver
   - Exit interviews with postpartum women
   - Provider in-depth interviews quantitative

3. Community research
   - Case narratives with women affected by D&A
   - FGDs with families, community members
Policy level views

“In some communities poor care during delivery has resulted in women not seeking care at the facility”
(senior health manager)

“How do you expect a midwife to be in a good mood if she works with no break and has many clients to attend to in a dirty working environment”
(health manager)
## Structural attributes: equipment and supplies available to conduct deliveries

<table>
<thead>
<tr>
<th>Scores for availability of:</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delivery supplies and kits (0-5)</td>
<td>3.9</td>
</tr>
<tr>
<td>Delivery equipment (0-13)</td>
<td>11.8</td>
</tr>
<tr>
<td>Other delivery supplies (0-11)</td>
<td>10.6</td>
</tr>
<tr>
<td>Infection control supplies (0-6)</td>
<td>4.2</td>
</tr>
<tr>
<td><strong>Overall scores (0-35)</strong></td>
<td><strong>30.5</strong></td>
</tr>
</tbody>
</table>
Prevalence of D & A observed during admission and delivery

- Physical abuse
- Non confidential care
- Non consented care
- Non dignified care

- Prevalence during admission
- Prevalence during delivery
Physical Abuse

“She slapped me on the thighs and I was being tossed around in unfriendly manner but we find it like it is normal to us”

(FGD women)

“Women need to be slapped so that they can conform and save the baby’s life”

(Provider IDI)
## Types of D&A observed & reported during childbirth

<table>
<thead>
<tr>
<th>Undignified treatment</th>
<th>Observed</th>
<th>Exit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treated in humiliating manner</td>
<td>5%</td>
<td>20%</td>
</tr>
<tr>
<td>Use of undignified language (Stupid, scolding)</td>
<td>23%</td>
<td>18%</td>
</tr>
<tr>
<td><strong>Physical and verbal abuse</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Verbally abused the mother</td>
<td>10.5%</td>
<td>4%</td>
</tr>
<tr>
<td>Physically abuse (Slapping)</td>
<td>3.5%</td>
<td>4.3%</td>
</tr>
<tr>
<td>Use of harsh tones</td>
<td>15%</td>
<td>18%</td>
</tr>
</tbody>
</table>
Non –dignified treatment

At xxxxx you walk naked, that is they ask you to strip completely. All your clothes are torn. When you try to refuse that’s where the beating starts. The clothes are thrown away; you cannot even trace them again after you recover. In other places you are only told to remove your skirt and inner clothes but they give you hospital gowns.(FGD, Women)
“You know why we say it is normal, when you go to a place, you follow the authority above, good or bad, you follow it.”

(FGD women)

They really threaten us and we fear them. I would rather disagree with a policeman but not a doctor. Doctor is next to God.

(FGD, men)
<table>
<thead>
<tr>
<th>Providers awareness of what might constitute clients’ rights during childbirth (n - 67)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Explain to clients on procedures to be performed</td>
<td>38.8</td>
</tr>
<tr>
<td>Obtaining consent for all procedures</td>
<td>50.7</td>
</tr>
<tr>
<td>Allow client to choose her birthing position</td>
<td>26.9</td>
</tr>
<tr>
<td>Respect her privacy</td>
<td>62.7</td>
</tr>
<tr>
<td>Keep her information confidential</td>
<td>37.3</td>
</tr>
<tr>
<td>Inform clients of danger signs during labour</td>
<td>29.9</td>
</tr>
<tr>
<td>Inform client of labor progress</td>
<td>32.8</td>
</tr>
<tr>
<td>Ensure procedures are done as per guidelines</td>
<td>29.9</td>
</tr>
<tr>
<td>Ensure privacy and confidentiality at all times</td>
<td>40.3</td>
</tr>
</tbody>
</table>
Providers

• **How do you expect a midwife to be in a good mood if she works with no break and has many clients to attend to in a dirty working environment**” (health manager)

• 23% of providers said that they treat clients as if they were ‘impersonal objects’

• 29% felt like they are at ‘the end of their tether’

• 6% said they don't care what happens to these client
74% providers help out when maternity ward is busy

- 70% Given compulsory time off
- 26% Paid overtime
- 4% Not paid at all
Implementation Research: Heshima Package of Interventions

Respectful Maternity Care

- VCAT training & manual
- Revised Health Service Charter
- Caring for the carers
- Male involvement
- Maternity open days
- Mediation training
- Policy Dialogue
- Maternal Health Bill

Constitution, Health rights and law
Thank you