How do midwives and women perceive debrief services after birth? A Synthesis proposal

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BACKGROUND There is a lack of clarity regarding debriefing services in maternity care. The HSE, (2020) has recognised a need for the opportunity and space for women to discuss their labour and birth events after women voiced a desire for the opportunity for birth discussion. 30% of women reported no opportunity to ask questions and felt uninvolved in their care after birth. Approximately 45% of women perceive their birth experience as traumatic. Often it is not the dramatic perinatal complications leading to obstetric emergencies that trigger trauma but other factors. Women have reported experiencing loss of control, loss of dignity, negative healthcare provider interactions, feeling unheard or the absence of informed consent and the inconsistent operations of the maternity care system.

AIMS This work aims to improve HCPs knowledge and understanding of women’s perceptions of their care during childbirth, the concept of midwife-led debriefing as well as recognising all aspects of labour and birth as important when providing postnatal debrief.

METHODS Qualitative evidence synthesis identified patterns and themes within the data while considering and appraising the similarities and differences across settings which could be considered or applied to enhance current practice. Study characteristics were represented followed by quality assessment of each study. The CASP checklist for qualitative was utilised in appraising each study and identifying trustworthy aspects. Thematic analysis was selected as most appropriate for this critically reviewing the literature.

RESULTS An overarching theme of a ‘needs’ was established through thematic analysis in chapter three. Then, three sub themes i) Expression, ii) Talking and iii) Understanding were identified to collectively represent ‘needs’. Women seek involvement in their care (HSE, 2020). Women want to discuss procedures and their beliefs for the rationales surrounding their birth events in order to understand. It is important to acknowledge the value in women’s perceptions which has been recognised in the qualitative literature. Fundamentally, an awareness of women’s needs to review their birth experience to have the opportunity to talk is imperative to their care.

RESULTS This synthesis highlights women’s needs to talk about their perceptions of their birth. The evidence shows women value talking to a midwife and midwives as autonomous practitioners can provide this service.

At the onset of this dissertation the most current NICE guideline (2016) advocated that structured postnatal debriefing should not be recommended. On April 20th 2021 NICE presented a new guideline asserts each woman should have the opportunity to talk about her birth experience. It advocates that information about the relevant support and birth reflection services should be provided as appropriate. This emphasised the value in being attune to current research while working in a clinical area.

CONCLUSION The needs of women are greatly overlooked and enfeebled within the clinical setting especially in the dominant obstetric culture within Ireland. Often women’s voices are undermined. This evidence synthesis highlights the strong need for women to have space for expression and talking in understanding their birth experience. Women should have the opportunity to talk about their birth experience. Information about the relevant support and birth reflection services should be provided as appropriate.