

Original research article

Decision-making of Czech mothers about contact with their baby after perinatal loss



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ARTICLE INFO

Article history: Received 10 January 2016 Accepted 5 February 2016 Available online 17 February 2016

Keywords: Perinatal loss Bonding Perinatal Grief Scale Decision-making Mixed method research

ABSTRACT

Introduction: The objective is to describe the experience of Czech mothers in terms of decisionmaking about visual and physical contact with a baby after perinatal loss, and also to explore the effect of this experience on the intensity of the mothers' grief after perinatal loss. *Methods*: A mixed method design using qualitative data from 18 in-depth interviews was

used in the Czech Republic, as well as mixed qualitative data from its in-deput interviews was internet based questionnaire. A total of 100 questionnaires were analyzed using "Interventions after Perinatal Loss" and the Czech version of "the Perinatal Grief Scale".

Results: The decision making of women after perinatal loss over contact with their deceased baby is influenced by internal factors (the need of a woman to get to know her child, concerns and fear of contact) and external factors (emotional support for the woman, professional information and interventions of the midwife or doctor). Internal factors are often conflicting and the social environment has the decisive say. The research has proven that a mother's independent decision about contact with a baby after perinatal loss has significant impact on the intensity of her grief. The grief of mothers who decided independently and who were sure about their decision was statistically significantly less intense than in mothers for whom the decision had been made by medical staff.

Conclusion: The results of our research reflect the professional uncertainty of Czech midwives taking care of mothers after perinatal loss. This is demonstrated in a majority of cases by a paternalistic approach to communication.

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Introduction

Perinatal loss (the death of a foetus in the uterus after 22 gestational weeks, and the early death of a neonate within 7

days of birth) affects about 400 parents in the Czech Republic annually. Death is in contrast to birth and yet they meet on this occasion. Parents lose not only their baby but also part of their future, their dreams and plans. Nowadays, parents develop a very close relationship with the foetus early on in pregnancy;

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they communicate with it, they can see it in ultrasound images and they prepare a place for it in the family. In the majority of cases the loss is accompanied by an intense mourning process. It is only recently that the practice of parents saying farewell to a baby through visual or tactile contact has been seen in the Czech Republic. This research is focused on the process of Czech mothers' decision-making about contact with a baby after perinatal loss.

The first reference to the psychological effects of perinatal loss on parents in scientific literature in the Czech Republic comes from the 1972 textbook Porodnictví (Obstetrics). In the chapter that deals with the death of a foetus in the course of pregnancy and during birth, Kotásek states: "Never show the mother her stillborn baby! Inform her gently that the foetus is not alive and postpone the explanation of the cause" [1]. Technological development resulted in the specification and development of diagnostic and therapeutic methods. However, the dehumanization of the healthcare professional-patient relationship occurred together with the medicalization of grief. By pushing death out of view, society placed an excessive pressure on the surviving relatives to cope with the situation in a very short time. In the second half of the twentieth century, mothers in the Czech Republic were made to deny their grief and replace the loss by having another baby. Mothers rarely had the opportunity to see their babies. Instead, stillborn babies "disappeared" to minimize psychological trauma.

Currently, perinatal mortality in the Czech Republic remains low. In 2013, according to the Czech Statistical Office, the stillbirth rate was 3.4 per mile, and the total perinatal mortality was 4.4 per mile [2]. However, the Czech Republic is still coming to terms with the previous practice of insufficient psychological and social care for mothers who sustained perinatal loss.

The objective of our study was to determine the following: which factors influenced the mothers' decision-making about visual or tactile contact with a baby following perinatal loss? Is the intensity of grief found in mothers after perinatal loss influenced by the decision about contact with a baby?

Material and methods

Design

The research part is based on the phase model combining sequential methods. The research strategy used is both qualitative and quantitative. A qualitative method is used to better understand the process of mothers' decision-making about their contact with a baby after perinatal loss, and then a quantitative method is used for assessing the influence this decision-making has on the intensity of the grief in mothers who sustained perinatal loss. This model led to strategies which do not attach different importance to individual types of research.

Participants

The research was carried out between 2011 and 2014. At first, the manager of the Prázdná kolébka (Empty Cradle, a self-help

group for parents who have lost their baby) was approached with a request for assistance. In January 2011, a letter was sent via this organization by e-mail to mothers who experienced perinatal loss in the Czech Republic, with a request for participation in the qualitative research in the form of an interview. Gradually, 18 mothers from the Czech Republic with experience of perinatal loss were acquired for cooperation. 11 of them agreed to a face-to-face interview and 7 agreed to an asynchronous e-mail interview.

The selection of the sample for the quantitative research was based on the principle of voluntariness and availability. The research survey was repeated in January 2012, 2013 and 2014. An invitation to participate in the quantitative research was published on the project "Prázdná kolébka" website, and a cover letter with links to the questionnaires on the Internet was also sent. Considering the relatively small basic sample and the sensitive topic, only the following criteria for the selection of the sample were selected: they had to be female, have experience with perinatal loss in the Czech Republic, it had to be a maximum of 5 years after their perinatal loss, and they had to be of Czech nationality. A total of 100 mothers duly completed the questionnaires.

Data collection

For the collection of qualitative data, several different methods were used which enabled a great deal of empirical material to be acquired. This concerned a semi-structured face-to-face interview, an asynchronous e-mail interview, and freely provided statements of participants in a questionnaire-based survey. The material acquired included textual information with a total of 554 thousand characters.

Two questionnaires were used for the collection of quantitative data. One of the questionnaires was a Czech version of the Perinatal Grief Scale (CzSVPGS). The Perinatal Grief Scale refers to a questionnaire recommended in a number of countries for finding the intensity of grief in mothers/parents who have sustained perinatal loss [3]. The CzSVPGS as a single-factor scale was used where all 33 items of the original scale are preserved. The reliability of the research tool determined by Cronbach's alpha coefficient ($\alpha = 0.9545$) indicates a high reliability [4]. The CzSVPGS includes 33 items assessed by the respondents on a 5-degree Likert-type scale that is limited by the following statements: I completely agree through to I completely disagree, with a neutral centre point (I do not know). The total score on the CzSVPGS ranges from 33 to 165 points. A higher score indicates a higher intensity of grief. Values above 91 points represent potential psychiatric morbidity.

The other questionnaire was titled Interventions after Perinatal Loss, which was based on a thorough study of professional references concerning the provision of psychological interventions to mothers sustaining perinatal loss by a midwife in the healthcare establishment. In addition to sociodemographic questions, the questionnaire contained questions focused on the offer of saying farewell to a baby (11 questions). These concerned the mother's contact with a baby, decisionmaking about it, feelings related to this type of contact and acquiring mementos of the baby. An open answer from this questionnaire was included in the qualitative data. Download English Version:

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