

Health Promotion Models in Midwifery

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Introduction

- Midwives should adopt a higher role in promoting health to the women and the families that they care for.
- (Roch & Downie1993).
- Traditionally, preventative methods such as health education and screening have been considered the most appropriate ways of improving health in midwifery practice.



- We need to work out for ourselves, which aim and which activities we use according to our profession code of conduct and our own considered needs and assessment.

(Ewles & Simnet 1985)



- Ewles & Simnet, in 1985, developed a framework of five approaches in midwifery.
- It allows the midwife to clarify their aims and values when using them.

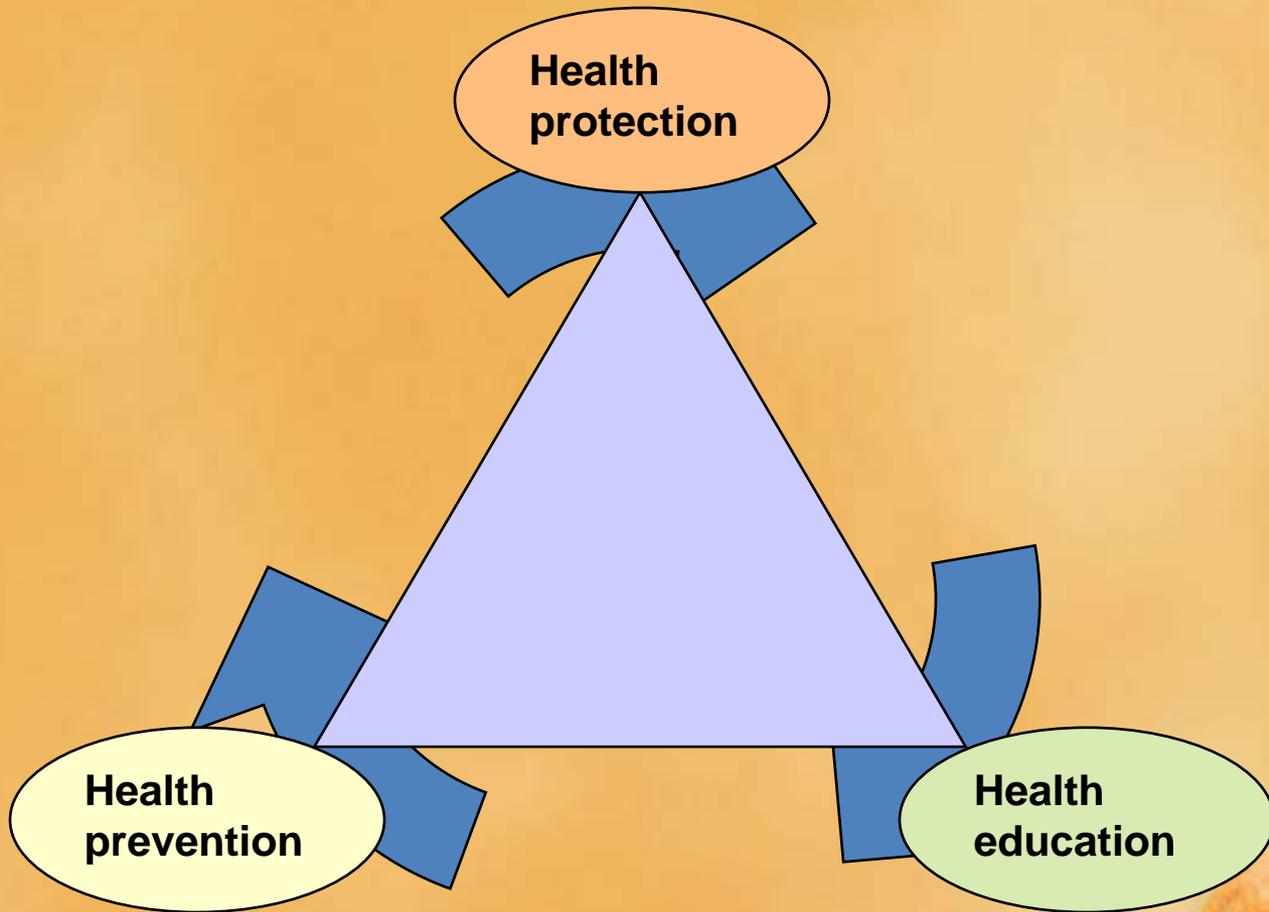


Domains of Health Promotion.

Three areas were identified:

- Health education
- Health prevention
- Health protection





Health Education

- Is defined as all influences that determine knowledge, belief and behaviour related to promotion, maintenance and restoration of health.
- E.g “stop smoking” campaigns,
- breast feeding workshops,
- Improving living and working conditions for pregnant women.



Health Prevention

- Encompasses avoiding or reducing the risk of different forms of disease, accidents and other forms of ill-health.



HEALTH PREVENTION

Sexual health

Child vaccination

Folic acid

contraception

Breast & cervical cancer



Health protection

- Incorporates the environmental aspects safeguarding health by political legislative and social control.
- It includes both individual and community actions in attempting to make environment hazards free.
- It excludes curative medicine.
- E.g. systematic antenatal care, employment law for pregnant women.



Health Promotion Approaches



1- The Medical Approach

- **The aim:**
- Freedom from medically defined disease, illness and disability.
- Involves active medical participation to prevent or improve ill-health.
- Physical well-being is the marker.
- Minimal or no reference to psychological, social or economical aspects of the cause and effect of disease.



- It values medical preventive procedures.
- There has been much debate in recent years on the role and place of medical approach in normal child birth.
- It is now rejected by midwives and the government as un suitable for women.

(Royal College of Midwives (RCM) 2000, Department of health).



2- The Behaviour Change Approach

- The midwife attempts to change the individual attitude and behaviours of a woman.
- The midwife encourages the woman to adopt a healthier life style, e.g. eating the right foods, and stopping smoking.



3- The Educational Approach

The aim:

- It is educationalist.
- The midwife will give the facts and information, with a few personal values.
- The recipient of this information is trusted to use it in whatever way she chooses.
- The educational issue is to raise issues.



it is a two-directional approach:

❖ *The midwife will provide information*

❖ *The woman will ask for information*



4- The client-centered approach

- “A bottom-up” rather than “a top-down approach”.
- Here the woman her self decides what the issues are and sets the agenda.
- The woman is seen as equal and the knowledge and skills that she brings to the interaction are valued.



- Some aspects of antenatal are amenable to this approach,
- While BP readings and other physical observations are important, their interpretation will demand the expertise of the midwife.



5- The Social Change Approach

- Doesn't directly concern the individual.
- Society is seen central to health in that changes need to be made on social and environmental fronts.
- Making the healthier option easier to achieve for most of the population.
- E.g. banning smoking in public areas.



Using models in midwifery

- Crafter 1997 took Smoking cessation as an example of how these models and approaches can be applied.
- She used as an example the midwives of Newplace Hospital who note high cigarette smoking rate among pregnant women.
- They wish to make a plan to reduce these rates, and tackle the related problems of longer term ill health and prematurity in the babies



Evidence

- In a study conducted to describe the feasibility of implementing e-Health program into standard midwifery care and to investigate use and user perceptions of the online program among pregnant women.



- ***Result***

- it seems feasible to integrate an eHealth program into standard midwifery care.

- Therefore, this eHealth program may be a feasible communication channel to promote a healthy lifestyle to pregnant women after suggested revisions have been carried out.

- M. Zutphen et al, Integrating an eHealth Program for Pregnant Women in Midwifery Care: A Feasibility Study Among Midwives and Program Users; (1); ON LINE.**



evidence

- In a systemic review to assess the effects of antenatal, intrapartum and postpartum care by midwives (intervention) vs. usual care by multiple caregivers,



Results

- that midwifery training programs:
- reduce intrapartum complications
- reduction in stillbirth incidence.
- Improvements in practical obstetric skills
- manage low-risk births
- reducing rates of perinatal mortality.



