

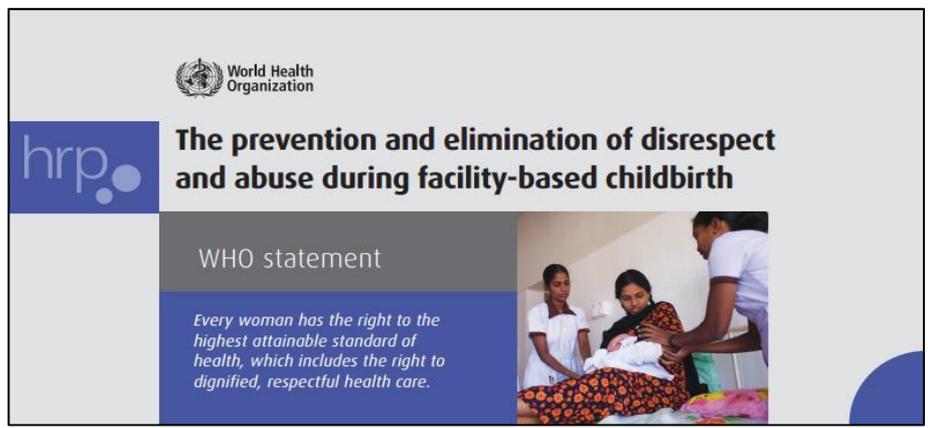
QoC Network Deep Dive: Respectful maternity care

Dr Özge Tunçalp, Dr Patience Afulani

Department of Sexual and Reproductive Health and Research, HRP, WHO
University of California, School of Public Health



WHO statement (2014)



- Endorsed by more than 90 organizations and published in 16 languages

The WHO statement calls for:

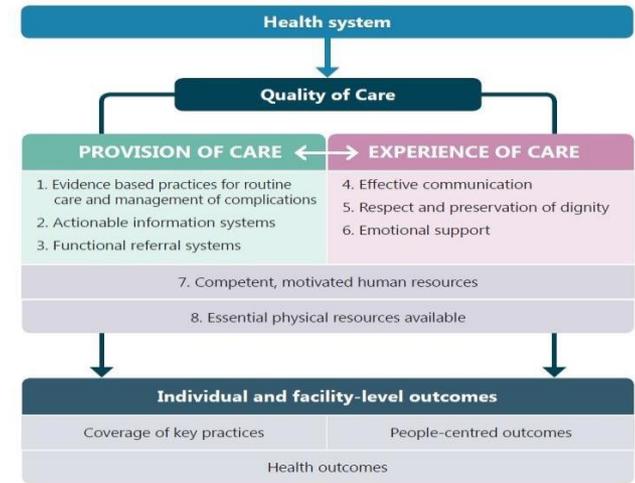
- ✓ Greater support from governments and development for **research and action**
- ✓ Programmes to **improve the quality of maternal health care, with a strong focus on respectful care**
- ✓ Greater emphasis on the **rights of women** to dignified, respectful healthcare through pregnancy and childbirth
- ✓ The **generation of data** related to respectful and disrespectful care practices, systems of accountability and meaningful professional support
- ✓ The **involvement of all stakeholders**, including women, in efforts to improve quality of care and eliminate disrespectful and abusive practices

Building the evidence base

Quality of care for pregnant women and newborns—the WHO vision

Ö Tunçalp,^a WM Were,^b C MacLennan,^b OT Oladapo,^a AM Gülmezoglu,^a R Bahl,^b B Daelmans,^b M Mathai,^b L Say,^a F Kristensen,^c M Temmerman,^a F Bustreo^c

^a Department of Reproductive Health and Research including UNDP/UNFPA/UNICEF/WHO/World Bank Special Programme of Research, Development and Research Training in Human Reproduction (HRP), World Health Organization, Geneva, Switzerland ^b Department of Maternal, Newborn, Child and Adolescent Health, World Health Organization, Geneva, Switzerland ^c Family, Women and Children's Health Cluster, World Health Organization, Geneva, Switzerland



RESEARCH ARTICLE

The Mistreatment of Women during Childbirth in Health Facilities Globally: A Mixed-Methods Systematic Review

Meghan A. Bohren^{1,2*}, Joshua P. Vogel², Erin C. Hunter³, Olha Lutsiv⁴, Suprita K. Makh⁵, João Paulo Souza⁶, Carolina Aguiar¹, Fernando Saraiva Coneglian⁶, Alex Luiz Araujo Diniz⁶, Özge Tunçalp², Dena Javadi³, Olufemi T. Oladapo², Rajat Khosla², Michelle J. Hindin^{1,2}, A. Metin Gülmezoglu²

BJOG An International Journal of Obstetrics and Gynaecology

[Explore this journal >](#)

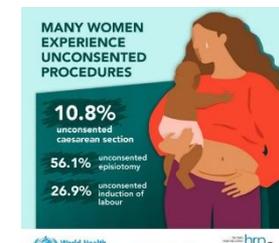
Systematic review

Respectful care during childbirth in health facilities globally: a qualitative evidence synthesis

Elham Shakibazadeh ✉, Masoumeh Namadian, Meghan A. Bohren, Joshua P. Vogel, Arash Rashidian, Vicky Nogueira Pileggi, Sofia Madeira, Sebastian Leathersich, Özge Tunçalp, Olufemi T. Oladapo, João Paulo Souza, Ahmet Metin Gülmezoglu

How women are treated during facility-based childbirth in four countries: a cross-sectional study with labour observations and community-based surveys

Meghan A Bohren, Hedieh Mehtash, Bukola Fawole*, Thae Maung Maung, Mamadou Dioulde Balde, Ernest Maya, Soe Soe Thwin, Adeniyi K Aderoba, Joshua P Vogel, Theresa Azonima Irinyenikan, A Olusoji Adeyanju, Nwe Oo Mar, Kwame Adu-Bonsaffah, Sihem Landoulsi, Chris Guure, Richard Adanu, Boubacar Alpha Diallo, A Metin Gülmezoglu, Anne-Marie Soumah, Alpha Oumar Sall, Özge Tunçalp



Building the evidence base – 2

- 1680 maternal-newborn dyads
 - describe the care received up to 2 h after birth for 15 newborn care practices;
 - inform the ongoing discourse on defining respectful newborn care
- Further research is needed to **better understand women's and families' expectations and preferences** around facility-based neonatal care practices, as well as **what practices might constitute mistreatment and respectful care.**

The first 2 h after birth: prevalence and factors associated with neonatal care practices from a multicountry, facility-based, observational study

Emma Sacks, Hedieh Mehrdash, Meghan Bohren, Mamadou Dioulde Balde, Joshua P Vogel, Kwame Adu-Bonsaffoh, Anayda Portela, Adeniji K Aderoba, Theresa Azonima Irinyenikan, Thae Maung Maung, Soe Soe Thwin, Nwe Oo Mon, Anne-Marie Soumah, Chris Guure, Boubacar Alpha Diallo, A Olusoji Adeyanju, Ernest Maya, Richard Adanu, A Metin Gülmezoglu, Özge Tunçalp

REVIEW

Open Access

Defining disrespect and abuse of newborns: a review of the evidence and an expanded typology of respectful maternity care



Emma Sacks

Mistreatment of newborns after childbirth in health facilities in Nepal: Results from a prospective cohort observational study

Ashish K. C. , Md Moinuddin, Mary Kinney, Emma Sacks, Rejina Gurung, Avinash K. Sunny, Pratiksha Bhattarai, Srijana Sharma, Mats Målqvist



GLOBAL HEALTH: SCIENCE AND PRACTICE
Dedicated to what works in global health programs

OPEN ACCESS

ORIGINAL ARTICLE

Global Research Priorities for Understanding and Improving Respectful Care for Newborns: A Modified Delphi Study

Hagar Palgi Hacker,^a Elena Ateva,^b R. Rima Jalivet,^c Bushra Al-makaleh,^d Theresa Shaver,^e Emma Sacks^f

- [WHO scoping review](#) – manuscript in press

Building the evidence base – 3

- [Supplement with further analyses](#) – adolescents, labour companion, satisfaction, vaginal examination, methodological development of tools
- Linkages with health systems
 - Quality improvement; caring for the carers
- Expanding to humanitarian settings

The first 2 h after birth: prevalence and factors associated with neonatal care practices from a multicountry, facility-based, observational study

Emma Sacks, Hedieh Mehrtash, Meghan Bohren, Mamadou Dioulde Balde, Joshua P Vogel, Kwame Adu-Bonsaffoh, Anayda Portelo, Adeniyi K Aderoba, Theresa Azonima Irinyenikan, Thae Maung Maung, Soe Soe Thwin, Nwe Oo Mon, Anne-Marie Soumah, Chris Guure, Boubacar Alpha Diallo, A Olusoji Adeyanju, Ernest Maya, Richard Adanu, A Metin Gülmezoglu, Özge Tunçalp

Home / News / Learning from women's experiences during childbirth to improve quality of care



Learning from women's experiences during childbirth to improve quality of care

Practice

Health workforce governance for compassionate and respectful care: a framework for research, policy and practice

Giorgio Cometto¹, Samuel Assegid², Geta Abiyu², Mesfin Kifle³, Özge Tunçalp⁴, Shamsuzzoha Syed⁵, Melissa Kleine Bingham⁶, Jennifer Nyoni⁷, Onyema Kester Ajebor⁸

Rethinking trust in the context of mistreatment of women during childbirth: a neglected focus

Veloshnee Govender¹, Stephanie M Topp², Özge Tunçalp¹

RESEARCH

Open Access

Exploring women's experiences during childbirth in health facilities during COVID-19 pandemic in occupied palestinian territory: a cross-sectional community survey

Niveen ME Abu-Rmeileh¹, Yasmeen Wahdan¹, Hedieh Mehrtash², Khitam Abu Hamad³, Arein Awad¹ and Özge Tunçalp²

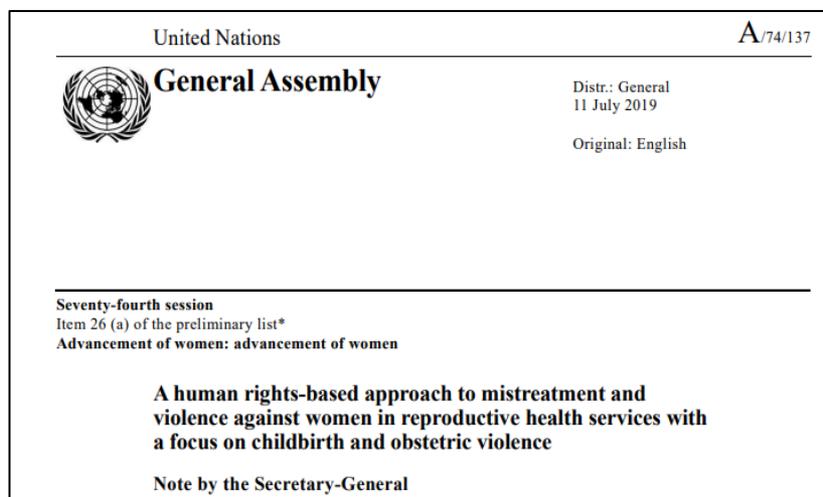


GLOBAL HEALTH COMPASSION and RESPECTFUL MATERNAL & NEWBORN CARE

Health nization hrp.

Building the evidence base - 4

- Review **international human rights standards under regional and international human rights laws** and lays out an agenda for further research and action. (2016)



- **Tracing recent developments**, examine how the United Nations Special Rapporteur on violence against women and the Parliamentary Assembly of the Council of Europe have addressed this issue. (2020)

International Human Rights and the Mistreatment of Women During Childbirth

RAJAT KHOSLA*, CHRISTINA ZAMPAS*, JOSHUA P. VOGEL, MEGHAN A. BOHREN, MINDY ROSEMAN, AND JOANNA N. ERDMAN



Resolution 2306 (2019)¹
Provisional version

Obstetrical and gynaecological violence

Parliamentary Assembly

Operationalizing a Human Rights-Based Approach to Address Mistreatment against Women during Childbirth

CHRISTINA ZAMPAS, AVNI AMIN, LUCINDA O'HANLON, ALISHA BJERREGAARD, HEDIEH MEHRTASH, RAJAT KHOSLA, AND OZGE TUNÇALP

Building the evidence base – 5

Measuring quality of care for all women and newborns: how do we know if we are doing it right? A review of facility assessment tools

Vanessa Brizuela, Hannah H Leslie, Jigyasa Sharma, Ana Langer, Özge Tunçalp

Policy & practice

When the patient is the expert: measuring patient experience and satisfaction with care

Elysia Larson,^a Jigyasa Sharma,^b Meghan A Bohren^c & Özge Tunçalp^d

BMJ Global Health

Original research

Measuring experiences of facility-based care for pregnant women and newborns: a scoping review

Elysia Larson ,^{1,2} Jigyasa Sharma ,² Khalidha Nasiri ,^{3,4} Meghan A Bohren ,⁵ Özge Tunçalp ,⁴

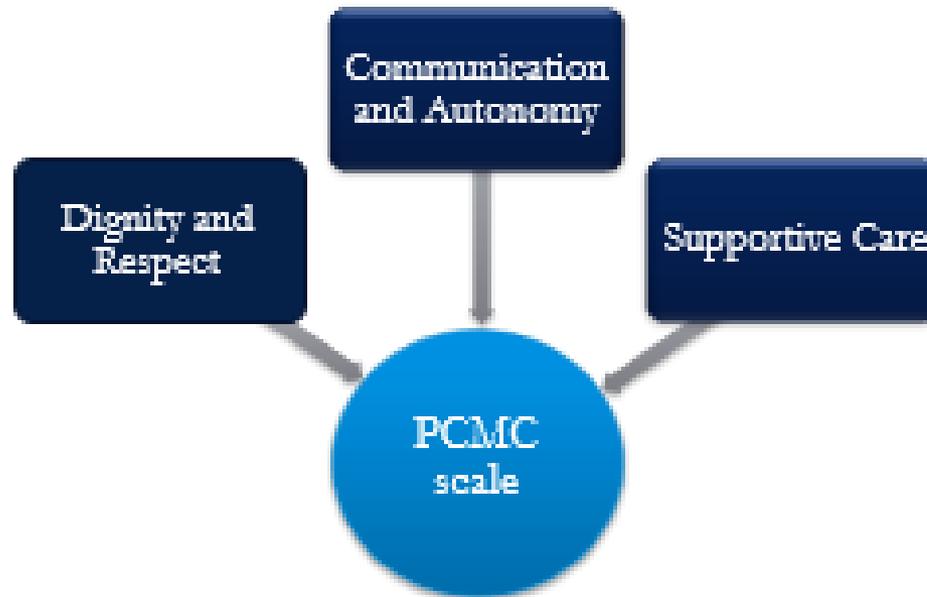
REVIEWS

⌘ A Rapid Review of Available Evidence to Inform Indicators for Routine Monitoring and Evaluation of Respectful Maternity Care

Patience A. Afulani, Laura Buback, Brienne McNally, Selemani Mbuyita, Mary Mwanyika-Sando and Emily Peca

Global Health: Science and Practice March 2020, 8(1):125-135; <https://doi.org/10.9745/GHSP-D-19-00323>

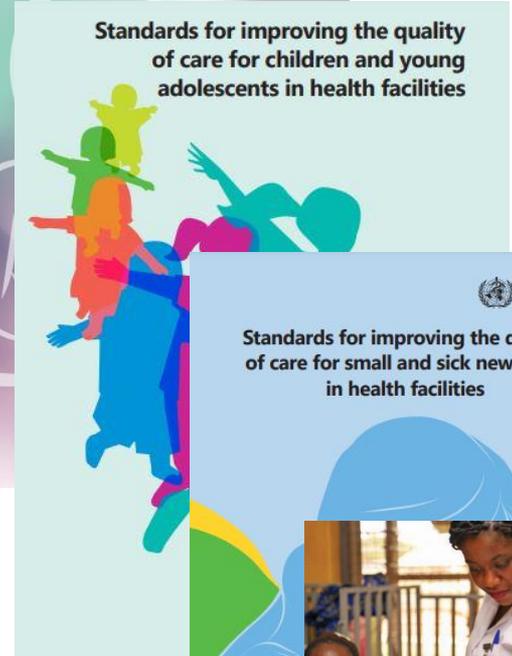
The person-centered maternity care (PCMC) scale



- Afulani PA, Diamond-Smith N, Golub G, Sudhinaraset M. Development of a tool to measure person-centered maternity care in developing settings: Validation in a rural and urban Kenyan population. *Reprod Health*. 2017;14(1):118.
- Afulani PA, Diamond-Smith N, Phillips B, Singhal S, Sudhinaraset M. Validation of the person-centered maternity care scale in India. *Reprod Health*. 2018;15(1):147.
- Afulani PA, Phillips B, Aborigo R, Moyer C. Person-centered maternity care in low- and middle-income countries: Analysis of data from Kenya, Ghana, and India *Lancet Glob Health*. 2019;7(1):e96-e109.

PCMC subscales and items	
Sub-scale	Items
Dignity and respect (6)	
	Treated with respect
	Friendly
	Verbal abuse
	Physical abuse
	Visual privacy
	Record confidentiality
Communication and autonomy (9)	
	Introduce self
	Called by name
	Involvement in care
	Consent to procedures
	Delivery position choice
	Language
	Explain exams/ procedures
	Explain medicines
	Able to ask questions
Supportive Care (15)	
	Time to care
	Labor support
	Delivery support
	Talk about feeling
	Support anxiety
	Attention when need help
	Took best care
	Control pain
	Trust
	Enough staff
	Crowded
	Clean
	Water
	Electricity
	Safe

Informing WHO norms and standards



QUALITY OF CARE FOR MATERNAL AND NEWBORN HEALTH: A MONITORING FRAMEWORK FOR NETWORK COUNTRIES

Updated February 2019

Companion of choice during labour and childbirth



World Health Organization



Companion of choice during labour and childbirth for improved quality of care

Evidence-to-action brief, 2020

Supporting women to have a chosen companion during labour and childbirth is a low-cost and effective intervention to improve the quality of maternity care, including women's experience of childbirth.




Every woman's right to a companion of choice during childbirth

9 September 2020 | Departmental news | Reading time: 3 min (715 words)

WHO strongly recommends supporting women to have a chosen companion during labour and childbirth, including during COVID-19.

Cochrane Database of Systematic Reviews

Perceptions and experiences of labour companionship: a qualitative evidence synthesis

Cochrane Systematic Review - Qualitative | Version published: 18 March 2019 | [see what's new](#)
<https://doi.org/10.1002/14651858.CD012449.pub2>

   [View article information](#)

 [Meghan A Bohren](#) | [Blair O Berger](#) | [Heather Munthe-Kaas](#) | [Özge Tunçalp](#)

Implementation of a labour companionship model in three public hospitals in Arab middle-income countries

[Tamar Kabakian-Khasholian](#)  [Hyam Bashour](#), [Amina El-Nemer](#), [Mayada Kharouf](#), [Ohoud Elsheikh](#), the Labour Companionship Study Group

Cochrane Database of Systematic Reviews

Continuous support for women during childbirth

Cochrane Systematic Review - Intervention | Version published: 06 July 2017 | [see what's new](#)
<https://doi.org/10.1002/14651858.CD003766.pub6>

   [View article information](#)

 [Meghan A Bohren](#) | [G Justus Hofmeyr](#) | [Carol Sakala](#) | [Rieko K Fukuzawa](#) | [Anna Cuthbert](#)

Companion of choice at birth: factors affecting implementation

[Tamar Kabakian-Khasholian](#)  & [Anayda Portela](#)

[BMC Pregnancy and Childbirth](#) 17, Article number: 265 (2017) | [Cite this article](#)

 OPEN ACCESS  PEER-REVIEWED

RESEARCH ARTICLE

From global recommendations to (in)action: A scoping review of the coverage of companion of choice for women during labour and birth

[Meghan A. Bohren](#)  [Alya Hazfiarini](#), [Martha Vazquez Corona](#), [Mercedes Colomar](#), [Bremen De Mucio](#), [Özge Tunçalp](#), [Anayda Portela](#)

Beyond service delivery: systems and societies

- ❖ Challenge harmful gender stereotypes
- ❖ Eliminate intersectional discrimination
- ❖ Disrupt power dynamics
- ❖ Address health system conditions & constraints



Strategies to reduce mistreatment and promote respectful care must account for **gender, racial and power dynamics**, and should include **participatory partnerships with communities**.

PLOS GLOBAL PUBLIC HEALTH

OPEN ACCESS PEER-REVIEWED
RESEARCH ARTICLE

Strategies to reduce stigma and discrimination in sexual and reproductive healthcare settings: A mixed-methods systematic review

Meghan A. Bohren, Martha Vazquez Corona, Osamuedeme J. Odiase, Alyce N. Wilson, May Sudhinaraset, Nadia Diamond-Smith, Jim Berryman, Özge Tunçalp, Patience A. Afulani

OPEN ACCESS PEER-REVIEWED
RESEARCH ARTICLE

A scoping review of the impact of organisational factors on providers and related interventions in LMICs: Implications for respectful maternity care

Bhavya Reddy, Sophia Thomas, Baneen Karachiwala, Ravi Sadhu, Aditi Iyer, Gita Sen, Hedieh Mehrtash, Özge Tunçalp

Published: October 11, 2022 • <https://doi.org/10.1371/journal.pgph.0001134>

OPEN ACCESS
REVIEW

A critical interpretive synthesis of power and mistreatment of women in maternity care

Marta Schaaf, Maayan Jaffe, Özge Tunçalp, Lynn Freedman

Published: January 30, 2023 • <https://doi.org/10.1371/journal.pgph.0000616>

The need

- ❑ How to take the next steps in delivery of multi-faceted multi-component solutions for RMNC
- ❑ Available evidence, recommendations and experiences organized, and packaged in an accessible and usable format, **to enable implementation, scale-up, and cross-contextual learning**

WHO knowledge translation toolkit on respectful maternal and newborn care

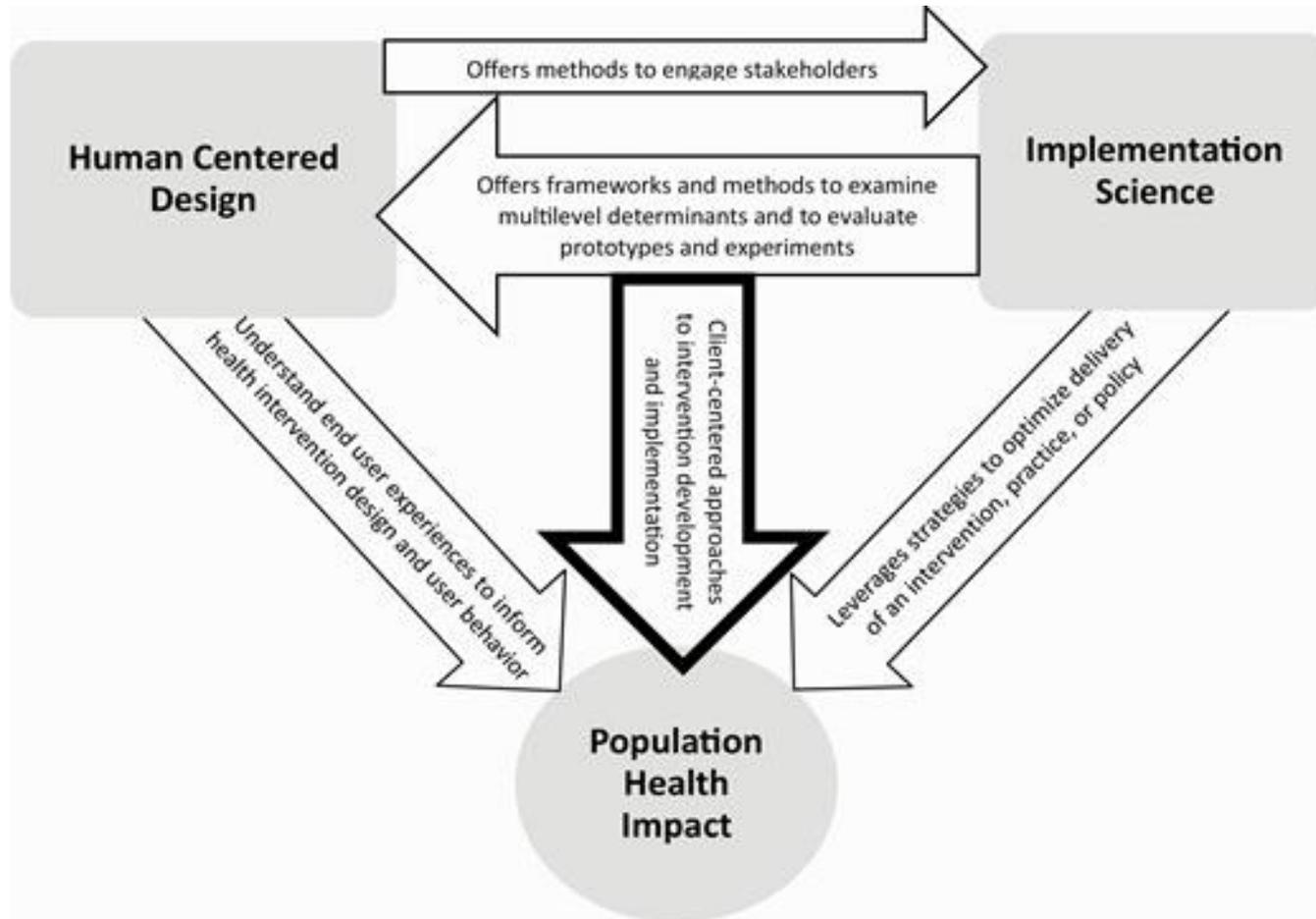


The aims

- ❑ **Policy-makers** to leverage national and sub-national policy change and costed plans for implementation;
- ❑ **Health programme managers and health workers** to improve skills to integrate and measure RMNC within programmes;
- ❑ **Researchers** to develop contextual models, document the lessons learned and measure the impact.



Bringing in implementation science and human centered design methods to develop the toolkit

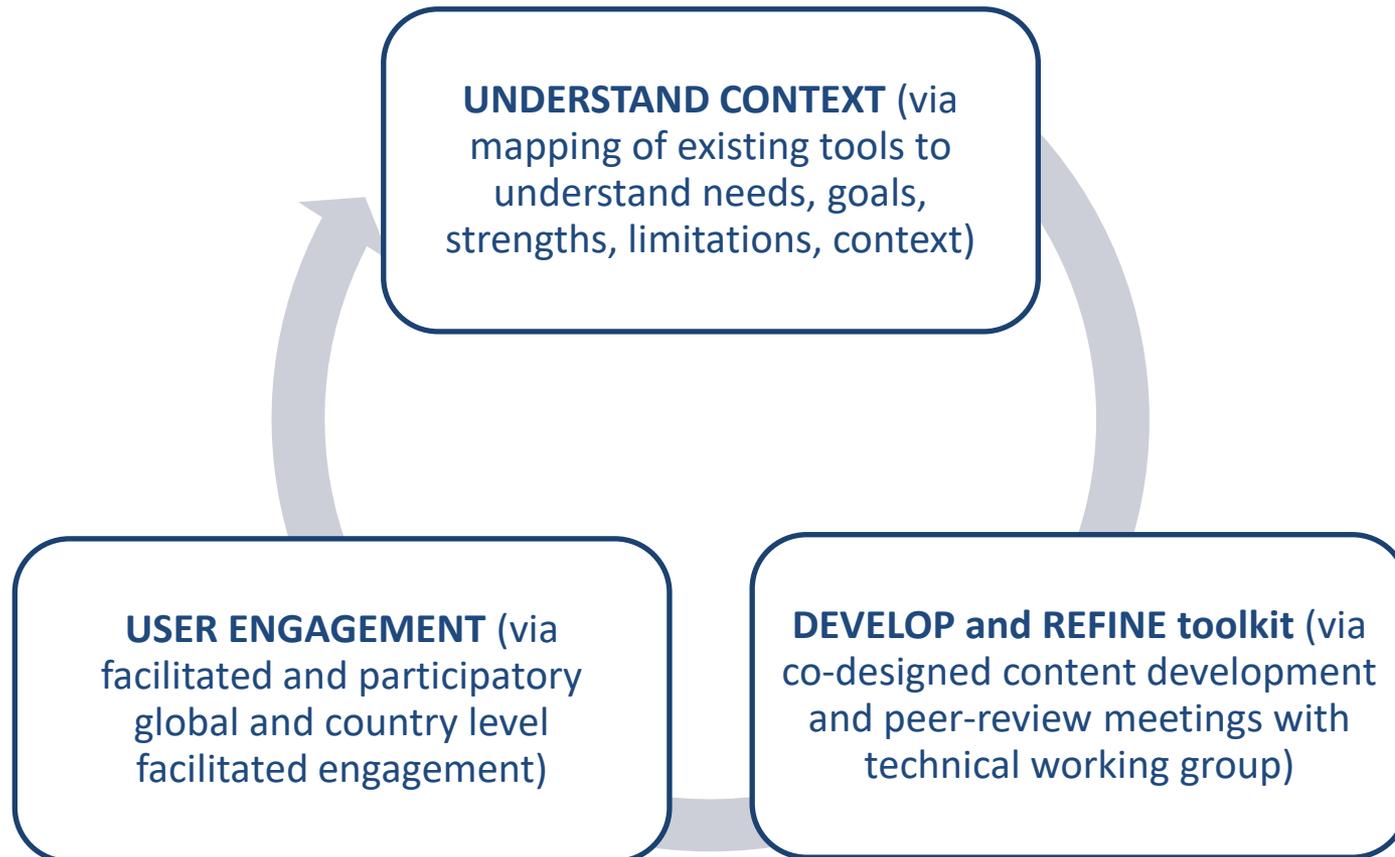


Elizabeth Chen, Gila Neta, Megan C Roberts, Complementary approaches to problem solving in healthcare and public health: implementation science and human-centered design, *Translational Behavioral Medicine*, Volume 11, Issue 5, May 2021, Pages 1115-1121, <https://doi.org/10.1093/tbm/ibaa079>

Our approach

User includes:

- Implementers
- Program managers
- Researchers



What to include?

- **Module 1:** Synthesizing what we know already
 - Background (terminology, evolution of the field)
 - Theory of change
 - Overview of implementation strategies
 - Measurement
- **Module 2:** Implementing RMNC across different settings
 - Three levels of health system
 - Policy and programmatic aspects
 - Research and learning agenda within health systems
- **Module 3:** Expanding beyond childbirth
 - Antenatal and Postnatal Care
 - Mental Health
 - Child health
 - Abortion and Contraception
 - **Across the continuum (self-care, digital)
- **Spotlight sections** throughout documenting case studies and examples

Icebreaker

Identify your favorite tool, name three characteristics and come up with a new way of using it?



Example:
Rubber band

Characteristics: Flexible, colorful, soft

New use: Use as knitting yarn to make a sweater

Mapping audience and needs

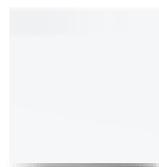
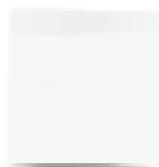
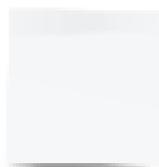
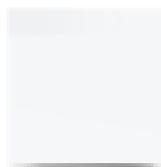
Who will be the key users of the toolkit and what are their key needs?

who are they?

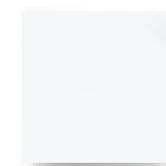
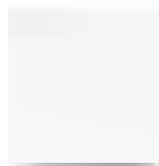
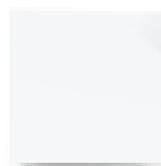
what do they need in their daily work from an RMC toolkit?



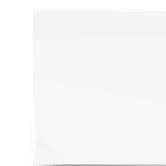
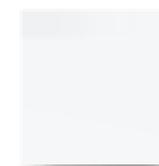
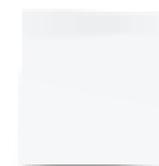
Health
worker



Health
manager



Policy
maker



Planning

How might the toolkit support the planning of RMC in our context



Frame 3

Implementing

How might the toolkit support the implementation of RMC in our context



Frame 4

Communicating

How might the toolkit support the communication of RMC in our context



Learning

How might the toolkit support the learning of RMC in our context



For more information on the WHO knowledge translation toolkit for respectful maternal and newborn care: tuncalpo@who.int