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 unsuitable 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 herself 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.
Thanks