

The Professional Behavior of Midwives with respect to Their Responsibilities in Hospital Labor Units in Sari in solar year 1390

Background: High quality midwifery care for patients in the labor unit is of great importance in the promotion of women's wellbeing and pregnancy health. The aim of the present study was to evaluate the professional behavior of midwives with respect to their responsibilities and the service they provide in labor units in the university, governmental and private hospitals across Sari in 1390.

Methods: Forty midwives working in labor departments of university, governmental, and private hospitals in Sari were recruited using random sampling and their professional behavior was assessed from four different aspects – i.e., midwives' self-assessment and their assessment by the labor unit chief, doctor, and patient. For data collection, four researcher-designed questionnaires (Q) regarding professional behavior were filled by the midwife (Q 1), labor unit chief (Q 2), gynecologist (Q 3) and patient (Q 4). The validity and reliability of the questionnaires were proven using the test-retest method. Descriptive and deductive data analysis was done using SPSS. **Results:** Overall, the subjects received the highest scores (i.e., favorable) with regard to following orders and writing patient files and received the lowest scores (i.e. average) concerning the follow up of laboratory results and consultations and being on time. Regarding the follow up of laboratory results and consultations, there was a significant difference ($p < 0.05$) between the labor unit chiefs' assessment of midwives and the assessment made by the gynecologists, with the highest and lowest scores given, respectively. However, there was no statistically significant difference ($p > 0.05$) between the highest and lowest scores achieved, taking into account the place of origin or the marital or employment status of the midwives.

Conclusions: Given the findings, the professional behavior of midwives working in labor units in Sari was at a favorable level. Yet, in order to improve standards of care, it is recommended that informative and educational steps be taken regarding the improvement of those factors considered to be of average assessment by the present study.

Keywords: professional behavior; midwives' responsibilities; labor unit

دراسة الكفاءة المهنية للقابلات التي تعملن في مستشفيات الولادة في مدينة ساری عام ۱۳۹۰

الخلفية والمعرف: تلعب توفير الرعاية التوليدية جيدة النوعية للمرضى في المستشفيات دورا هاما في تحسين صحة المرأة والصحة الانجابية لها. وقد اجريت هذه الدراسة لتقييم الكفاءة المهنية للقابلات التي يعملن في المستشفيات الحكومية والخاصة لمدينة ساری عام ۹۰.

الاطلوب: في هذا البحث تم الاستعانة ب ۴۰ قابلة من القابلات التي يعملن في المستشفيات الحكومية والخاصة حيث تم اختيارهن بصورة عشوائية. يجب تقييم الكفاءة المهنية للقابلات من ۴ جوانب: تقييم القابلة لنفسها، تقييم مسئول القسم للقابلة، تقييم الطبيب النسائية للقابلة، و تقييم المريض للقابلة. الطريقة التي تم جمع فيها المعلومات عبارة عن اربعة استمارات تملن بتقييم الكفاءة، الاستمارة الاولى تملن من قبل القابلة، والثانية تملن من قبل مسئول القسم، والثالثة تملن من قبل الطبيبة النسائية والرابعة تملن من قبل المريض. وقد تم كتابة الاستمارة من قبل باحث متخصص محترف كما يتم مقياسها وتجربتها عن طريق امتحان test-retest، وكما انه تم تحليل البيانات في اللاحضاء الوصفي والاستدلالي باستخدام برنامج spss

النتائج: بشكل عام فان القابلات التي تم اختيارهن لهذا البحث قد كسبن النقاط الاكبر في تنفيذ الاوامر وتدوين الملفات وتنظيمها. وقد حازوا على اقل نقاط في مجال متابعة الفحوص والاختبارات الطبية ومساورة المرضى. وكما انهم قد حازوا على حضورهم في مكان عملهم اقل نقاط بمستوى متوسط. من وجهة نظر معظم مسؤولين الاقسام فان اكبر نقاط قد حصلنهن القابلات في مجال متابعة الفحوصات والمساورة. وفي المقابل فان الاطباء قد اعطوا هذا المجال العدد الاقل من النقاط. والفرق الاحصائي كان له دلالة هامة ($p < 0.05$) فالعائلة الاجتماعية والافراد المحليين والوضع الوظيفي للذين اكتسبوا اكبر عدد من النقاط بالمقايسة من الافراد الذين حصلوا على اقل عدد من النقاط لم يكن لدرسيم أي دلالة احصائية هامة ($p > 0.05$)

الاستنتاج: بناء على نتائج هذا البحث فان الكفاءة المهنية للقابلات التي تملن في مراكز الولادة في مدينة ساری كانت مرغوبة. ولكن لارتقاء جودة الخدمات من الاطفال تدريب وتوعية القابلات لتحسين المؤثرات التي وردت في هذا البحث بمستوى متوسط

الكلمات الرئيسية: الكفاءة المهنية، وظائف القابلة، مركز الولادة.

دوبزار گیاره میں شہر ساری کے اسپتالوں میں میڈ وائفری سروسس کا پیشہ ورانہ لحاظ سے جائزہ۔

بیک گراؤنڈ: اسپتالوں میں داخل مریضوں کے لئے مڈوائفری سروسس کا معیار حاملہ خواتین کے حفظان صحت میں نہایت اہم کردار کا حامل ہے۔ یہ تحقیق سرکاری اسپتالوں، یونیورسٹی کے اسپتالوں اور پرائیویٹ اسپتالوں میں مڈوائفری سروسس کے پیشہ ورانہ معیار کا جائزہ لینے کے لئے انجام دی گئی ہے۔

روش: اس تحقیق میں چار مڈوائفز کو جو شہر ساری کے سرکاری اسپتالوں، یونیورسٹی کے اسپتالوں اور پرائیویٹ اسپتالوں میں کام کرتی ہیں شامل کیا گیا۔ یہ تحقیق دوپزار گیارہ میں انجام دی گئی۔ ان لوگوں کا انتخاب ریڈم طریقے سے کیا گیا۔ ان کی سروسس کا جائزہ چار طریقوں سے لیا گیا، خود مڈوائف اپنی کارکردگی کا جائزہ لے، مڈوائفری شعبہ کی سربراہ ان کی کارکردگی کا جائزہ لے، بیماروں کی جانب سے مڈوائفز کی کارکردگی کا جائزہ، اور ڈاکٹر کی جانب سے مڈوائفز کی سروسس کا جائزہ۔ ان کام کے لئے چار فارمز تیار کئے گئے تھے، پہلا فارم خود مڈوائفز نے پر کیا، دوسرا فارم، مڈوائفری شعبے کی سربراہ، اور تیسرا فارم بیماروں نے پر کیا جبکہ چوتھا فارم ڈاکٹروں نے۔ نشت ری نشت کے ذریعے ان فارموں کی افادیت یقینی بنائی گئی۔ جوابوں کا جائزہ ایس پی ایس ایس سافٹ ویئر سے لیا گیا۔

نتائج: اس تحقیق کے مطابق مڈوائفز نے ڈاکٹروں کی ہدایات اور کے شیٹ کو صحیح لکھنے میں سب سے زیادہ نمبر حاصل کئے جبکہ وقت پر کام پر آنا اور لیباریٹری نشتوں کو اہمیت دینے کو متوسط نمبر ملے۔ میٹر نیٹی شعبے کے سربراہوں کی نگاہ میں مڈوائفز کو لیباریٹری نشتوں کی پیروی اور بیماروں کی کونسلنگ کو سب سے زیادہ نمبر ملے تھے جبکہ ڈاکٹروں نے اس سلسلے میں سب سے کم نمبر دئے تھے۔ زیادہ یا کم نمبر لینے والی مڈوائفز میں شادی شدہ ہونا، مقامی ہونا یا ان کی نوکری کی صورتحال کوئی خاص موثر نہیں تھی۔

سفرشات: اس تحقیق کے نتائج سے معلوم ہوتا ہے کہ مڈوائفری کا پیشہ شہر ساری میں مطلوب حد تک قابل قبول ہے لیکن اس میں مزید ترقی لانے اور مڈوائفز کو مزید معلومات فراہم کرنے اور انہیں مزید پیشہ ور بنانے کے لئے تعلیم دینا ضروری ہے اور اس تحقیق میں جن مسائل کا ذکر کیا گیا ان پر عمل کیا جانا ضروری لگتا ہے۔

کلیدی الفاظ: پیشہ ورانہ، مڈوائفری، میٹر نیٹی ہوم۔

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بررسی حرفه ای گری ماماهاای شاغل در بخش زایشگاه بیمارستان های شهر ساری در انجام وظایف در سال ۱۳۹۰

زمینه و هدف: ارائه مطلوب و با کیفیت مراقبت‌های ماماای به بیماران بستری شده در بخش زایشگاه نقش مهمی در ارتقای سلامت زنان و بهداشت باروری دارد. این پژوهش به منظور بررسی حرفه ای گری ماماهاای شاغل در زایشگاه های بیمارستان های شهر ساری در انجام وظایف محوله به آنان در زمستان سال ۹۰ صورت گرفته است.

روش: در این پژوهش ۴۰ ماماای شاغل در زایشگاه های بیمارستان های دولتی آموزش، دولتی درمانی و خصوصی شهر ساری به روش نمونه گیری تصادفی انتخاب و وارد مطالعه شدند. ابزار گردآوری داده ها چهار فرم پرسشنامه بود که در زمینه حرفه ای گری محقق ساخته ای بوده و پایایی و روایی آنان از طریق آزمون test-retest سنجیده شده بود. تحلیل داده ها با استفاده از نرم افزار spss صورت گرفت.

یافته ها: ماماهاای مورد مطالعه در زمینه اجرای دستورات و نوشتن درست پرونده ها بیشترین امتیاز را در سطح مطلوب و در زمینه پیگیری آزمایشات و مشاوره ها و حضور بموقع در محیط کار کمترین امتیاز را در سطح متوسط کسب کردند. از دیدگاه مستولین زایشگاه بیشترین امتیاز ماما در زمینه پیگیری آزمایشات و مشاوره ها بود، که با دیدگاه پزشکان که در این مورد کمترین امتیاز را به ماما داده بودند تفاوت آماری معنی دار داشته است. ($p < 0.05$) بومی بودن، وضعیت تاهل، وضعیت استخدام در افرادی که بیشترین امتیاز و افرادی که کمترین امتیاز را کسب کرده بودند تفاوت آماری معنی دار نداشت. ($p > 0.05$)

نتیجه گیری: با توجه به یافته ها، حرفه ای گری ماماهاای شاغل در بخش زایشگاه های شهر ساری در سطح مطلوب قرار داشت. ولی جهت ارتقاء کیفیت خدمات بهتر است آگاهی ها و آموزش های لازم در جهت بهبود شاخص هایی که در این پژوهش در سطح متوسط ارائه شده بودند انجام بگیرد.

واژه های کلیدی: حرفه ای گری، وظایف ماما، زایشگاه

INTRODUCTION

The approach of today's world is getting back to logic and ethics. Human being is going to provide his material and spiritual needs through a logical and ethical after passing different periods of time. Therefore ethics can be considered as the center and focus of future world developments. This viewpoint mostly affects majors which are pioneers in giving services to people. Medical sciences majors are such fields which have been full of considerable and exemplary ethical aspects in the past, present, and future. Today world's developments include specifications which have caused the need to an ethical approach in medical professions to be an undeniable requirement (1).

If for reaching health improvement, professional qualification is considered as the main condition, therefore because of its being comprehensible, infrastructural and topic-based, all development pre-requirements and high quality service are also achieved (2). As the basis of ethics is identifying good from bad, professional qualification can be considered equal to be qualified to be a professional. It means that if the midwife achieves the qualification and skill to identify good from bad and make herself do advantageous jobs and prevent herself from doing disadvantageous ones, her deeds lead to the development of advantages in the health care field (3). Now, if we generalize this matter, it means to develop professional advantages through planning, midwifery will do health care well and nothing is done badly which will lead to qualification development or what the society expects us to do (4). Although ethic priority has been very much emphasized, what is considered in practice at the moment is uncertainty about professional qualifications, midwives' qualifications, abilities, and skills are repeatedly criticized. These criticisms originate from inside and outside of health system (5), this developing and dynamic system needs a personnel with professional qualifications that can take ethical and favorable care. This requires the personnel to besides having appropriate functional skills, be very much efficient in critical thinking, clinical decision making, clinical judgment, ethical reasoning, and effective relationship with the patient (6).

Giving favorable and high quality midwifery care to adopted patients in labor unit plays an important role in improving women's health and fertility hygiene. This study has been conducted with the purpose of studying the professional behavior of midwives working in educational governmental, treatment governmental, and private hospitals of Sari in giving services and doing their burdened tasks in winter of 1390.

METHODS

The present study is descriptive cross-sectional which has been conducted sectionally in 1390. Participants included 40 midwives working in educational governmental hospital (Imam Khomeini hospital), treatment governmental hospital (Hekmat hospital), and private (Nimeh-Shaban and Shafa hospitals) of Sari who were selected through simple random sampling by using number table, sample size was chosen according to the results of previous studies and sample size formula with $\alpha=0.05$. The applied questionnaire was

planned based on international codes of medical ethics and after studying some previous studies. The general part included background specifications (demographic) and the special part included 13 questions which assessed four expected (7, 8) qualifications of the participants which are as follows:

- 1- Being responsible: punctuality and doing burdened responsibilities perfectly and respecting rules and regulations.
- 2- Communication skills: honesty and appropriate behavior and cooperation with the patient, his family, and colleagues.
- 3- Professionalism and respecting others: being committed to do professional responsibilities, faithfulness to ethics, and being sensitive to patients' problems.
- 4- Fair and system-centered function: taking the advantages of system and organization in to consideration, taking cost-effective treating steps. The study of midwife professionalism was assessed through four different aspects which were: self-assessment of the midwife, labor unit chief's assessment of midwife, physician's assessment of midwife, and patients' assessment of midwife. Data collection tools were four questionnaires about professionalism. Questionnaire number 1 was filled by the midwife herself, number 2 by labor unit's chief, number 3 by a gynecologist, and number 4 by patients.

The score of each one of the choices was based on a Likert scale of 1 to 9; unfavorable 1 to 3, average 4 to 6, favorable 7 to 9. For the determination of the validity of data collection tool content validity was used, and therefore the questionnaires were distributed among some instructors and experts and with using their opinions and consultations, the questions were studied from the point of content and ambiguities were omitted so that its validity was confirmed. For calculating the reliability of the questionnaire different methods are used which are: test-retest method, parallel tests, Alpha Cronbach (9). According to the condition of the study Alpha-Cornbach was used for the determination of the reliability of the questionnaire, for this purpose the first questionnaire was distributed among some midwives before conducting the main step of the study and after collecting them, reliability was analyzed and measured by SPSS 16. Alpha Cronbach was achieved as 0.85 for the questionnaire with expressed appropriate reliability and validity. Data was analyzed by SPSS 16; distribution and central, ANOVA, and post hoc.

RESULTS

The average age of participants was $36.3 \pm 10.9.4$ midwives (10%) had a job record less than 5 years, 14 (35%) between 5 to 10 years, and 22 people (55%) more than 10 years. 30 midwives (83.3%) were local, and 6 (16.7%) were not. 4 midwives hadn't filled the questionnaire.

From the viewpoint of midwives themselves, they were skilled favorably in all fields. From the viewpoint of the labor unit chief, midwives got the highest score 53 ± 1.8 (out of 54) in laboratory follow up (being responsible).

The score given in its field by the gynecologist was 42.9 ± 7.7 which was significantly different from the chief's opinion. Also from the viewpoint of labor unit chief,

midwives got the lowest score, (professionalism). From the viewpoint of gynecologists, midwives got the lowest score in not caring about the appearance and covering themselves properly, 24.7 ± 5 out of 36, and laboratory tests, consultations follow up and taking early diagnostic and treating actions (being responsible), 42.9 ± 7.7 out of 54 and got the highest score in punctuality (system-centered function), 20.7 ± 4.5 out of 27.

DISCUSSION

Finally the lowest achieved scores have been about average and it seems that professional behavior of midwives working in labor units of Sari hospitals is favorable.

Sokhanvar in the study of awareness rate of nursing ethical principles in clinical decision making and its application from the viewpoint of nurses state that in nurses of Shiraz university of Medical Sciences opinion the rate of applying ethical principles in clinical decision making has not been favorable and nurses were not able to apply ethics in the real workplace (10).

Gaul expresses that in contrast with the availability of books, journals, and various sources in the case of professionalism, teaching of ethics is not in a way that the students comprehended ethical reasoning appropriately and are not qualified sufficiently in this filed (11). On the other hand, playing roles appropriately, doing their responsibilities besides taking technical actions, paying more attention to legal and ethical aspects of their job can be trained and suitable strategies for ethical function can be accessible and developed (12).

Homaee Rahimi for becoming aware of patients' viewpoints in the case of invasion of their privacy presented that 81.2% of patients were unsatisfied with invasion of their privacy and 78% were not satisfied with secret keeping, 75.4% with not getting enough attention and enough care. He said that one of the reasons of these problems was lack of knowledge and appropriate training in the case of respecting patients' rights and professional ethics (13).

History of midwifery as a holy profession which gives valuable services in hard conditions automatically conveys the sense of giving services and ethical commitment in this profession and it is expected that the given services are humanistic and ethical. Although in our study the midwives' professional behavior is favorable but in previous studies this was not favorable, therefore this profession as a system

has to find a solution for this problem among which the firsts are the concentration focus and effecting status of educational centers.

The importance of ethical care is to an extent that it is sometimes more than technical aspects. This point is not just a deduction that originates from human's instinct and tendency to good-temperedness, but it is a logical matter because paying attention to ethics in taking care precedes the need to constant learning and doing appropriate tasks (13). Thus, investment in the case of ethical qualification of the staff of this field is a ways to improve the quality of services. Ethical responsibilities besides ethics improvement are performed better if they are initialized in it, therefore planning methods and ethics improvement structures seem necessary (14).

In Iran's course curriculum although ethical courses are somehow discussed, but a plan is need for ethics subjects and students' encounter with ethical problems. Also this should be taken in to consideration by people in charge and programmers therefore appropriate conditions for the improvement of professional behavior qualification which is one of the important criteria for caring patients are provide (15). The results of Vahedian and Elhani's study also have shown that future studies have to focus on instructors, and clinical trains, personnel, and even nursing students as future professionals of this field and the effect of constant education on ethics should be taken in to consideration. Organizational factors and different fields related to ethical decision making training have to be studied and discussed in future (16).

According to the limited number of studies in the field of professionalism in Iran in comparison to other countries, the results of present studies and this study in contrast with the favorability of professional behavior of midwives understudy, indirectly expresses that In this field the ability of medical team specially nurses and midwives who are directly in contact with patients in the case of solving ethical matters and decision making more planned actions and studies are needed.

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