



Level of Prevalence of Disrespect and Abuse of Women during Child Birth in Selected Health Care Facilities in Nsukka, Enugu State, Nigeria

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Abstract

Original Research Article

Background: The prevalence of disrespect and abuse of women during childbirth in health facilities in Nigeria and lack of quality care render during childbirth is of great concern to both providers and consumers of maternal care. This study assesses the disrespect and abuse of women during childbirth in selected health facilities in Nsukka local government area, Enugu state. The specific objectives were to determine the prevalence of disrespect and abuse, determine the factors that contribute to the disrespect and abuse, and finally determine the forms of disrespect and abuse.

Methods: A descriptive research design was adopted for the study while a convenience technique was used to select respondents for the study. The study was carried out in three health facilities, university of Nigeria medical center Nsukka, General hospital Nsukka and Primary health care centre Nuskka in Enugu state. A total population of 101 respondents including post-natal mothers from the above hospitals was sampled. Data was collected using the Level of Disrespect and Abuse of Women during Childbirth Scale (LDAWCS) questionnaire. Data were collected after oral consent from the respondents was granted and were analysed with use of SPSS/IBM version 23.

Results: The major findings of the study revealed prevalence of disrespect and abuse during childbirth in selected hospitals was high with 61(60.4%) of women experiencing at least one form. The foremost forms of abuse and disrespect were: that the health care provider used harsh words on them with mean score of (3.37±1.55); scolded by the health care provider (3.36±1.56), women left naked in the view of many staff (3.27±1.25); and been rude on them with mean score of (3.28±1.56).

Conclusion: The study recommends healthcare institutions should implement comprehensive training programme for healthcare providers, emphasizing respectful care and communication, and clear guidelines and protocols should be established for obtaining informed consent for medical procedures.

Keywords: Prevalence, Disrespect, Abuse, Child Birth, Enugu State

INTRODUCTION

Disrespectful and abusive behaviors on woman during the process of child birth at health facilities is a public health concern, which violates woman dignity, integrity, and respectful care in maternity units¹. The Mistreatment of a woman during the process of child birth at health facilities has become an international agenda by maternal and child health advocates. World Health Organization ² asserts that “every woman has the right to the highest attainable standard of health which includes: the right to dignified, respectful

health care". Globally, about 140 million women give birth every year according to World Health Organization in 2015³. There are an estimated 303,000 maternal deaths occurred in 2015, with 66.3% occurring in Sub-Saharan Africa³. While substantial progress has been made to reduce maternal mortality, one in 38 women residing in sub-Saharan Africa is still at risk of maternal death. The majority of maternal deaths are preventable and manageable with good quality reproductive health services and skilled birth attendance⁴.

However, disrespect and abuse during childbirth is common throughout the world. It can occur at the level of contact between the client and the care provider⁵, as well as through systemic failures at the health facility and health system level. In spite of available evidence of disrespect and abuse of women in facility-based childbirth care, there are few interventions geared towards reducing disrespectful and abusive care and promoting respectful maternal care in this environment. There is the need to create awareness by providing data and the proof of its occurrence⁶. It is a violation of the fundamental human rights of women, newborns, and families. Every expectant mother has the right to get quality of health care which is respectful, dignified, free of violence, free of discrimination, the right to know the procedure and any activities related to health care, nevertheless disrespect, abuse and abandonment of women during the process of childbirth at health facilities constitute serious violation of women rights, which is acknowledged across in the world^{1,7}.

The researcher, in the course of community posting has severally observed women of child bearing age complained about the kind of abuse and disrespect they got during labour and childbirth which indicates that a lot of women go through disrespect and abuse such as non-consented and non-dignified care to abusive care and abandonment and the commonest was the non-consented care and physical abuse⁷. Non-consented care was carried out for procedures such as episiotomies, blood transfusions and caesarean sections and physical abuse included being beaten, slapped, restrained and tied by health workers⁸. Based on the foregoing, it was therefore the interest of the researchers to evaluate the level of prevalence of disrespect and abuse of women during childbirth in selected health facilities in Nsukka, Enugu state, Nigeria

METHOD

Research design

This research is a non-experimental, cross-sectional descriptive research design.

Area study

This research was carried out within Nsukka metropolis, Enugu state and was conducted in three (3) healthcare facilities in Nsukka Local Government Area. The facilities include: General Hospital Nsukka, University of Nigeria medical center Nsukka and Health center Nsukka old GRA. These health facilities were chosen because of their proximity to the researcher. General Hospital Nsukka is a government secondary health facility located in Ede-oballa, opposite Nsukka local government office, adjacent to Queen's secondary school Nsukka. University of Nigeria medical center Nsukka is a secondary health facility located at university of Nigeria Nsukka campus, opposite the medical center is are girls' hostels Akintola, Akpabio and Okeke hostels. Health center Nsukka old GRA opposite it is school of health technology, police station, Nsukka township stadium.

Sample Size Determination and Sampling techniques

The sample size for the study was 101 respondents and a simplified formula for proportions, Taro Yamane, was used to calculate the sample size, the acceptable sample error, e , 5%, 95% confidence level and $p=0.5$ were assumed. A convenience sampling technique was used in selecting the respondents for the study utilizing inclusion criteria of willingness to participate; been emotional, physical and mental well-being at the time of study; the respondents should be post-natal nursing mothers.

Instruments of data collection

The instrument that was used for data collection was a structured questionnaire developed by the researchers. The Items in the questionnaire were generated based on existing literature, with respect to the objectives of the study.

Ethical Consideration

Prior to data collection, student identification letter was obtained from the Head of Department of Nursing Sciences, University of Nigeria, Enugu Campus (UNEC). Ethical approval was obtained from the Health research and ethical committee of Ministry of health Enugu state for the study. Informed verbal consent was sought from the respondents before the questionnaire was administered. Voluntary participation was employed and the principle of confidentiality and anonymity was used to obtain information from the respondents.

Method of Data Analysis

The data was analyzed using descriptive and inferential statistics. The descriptive statistics frequency and percentage were used to summarize the items of the questionnaire. These statistics were done with the aid of the Statistical Package for Social Science (SPSS) version 25 and Microsoft Excel 2007.

RESULT

Table1: Socio-demographic characteristics; A total number of 101 individuals participated in this study. it is stated that 42(41.6%) of the respondents falls in modal age group (30 – 39) years. The majority of respondents 77(76.2%) were married, the highest percentage of respondents 91(90.1%) were of Christian religion and majority 84 (83.2%) were Igbo. Majority 59(58.4%) reside in urban area as compared to rural 42(41.6%). majority 72 (71.3%) attended tertiary education, majority 39(38.6%) have 1-2 children.

Table 1: Demographic Information of the respondents

n = 101

Variable	Frequency	Percent	Mean	Sd
Specify which of the University did you use for child birth				
General Hospital Nsukka	32	31.7		
University of Nigeria, Medical Center, Nsukka	35	34.7		
Nsukka Health Center, Old GRA	34	33.7		
Age				
16-20	9	8.9		
21-29	28	27.7		
30-39	42	41.6		
>=40	22	21.8		
Marital Status				
Single	14	13.9		
Married	77	76.2		
Divorced	7	6.9		
Widowed	3	3		
Religion				
Christianity	91	90.1		
Islamic	9	8.9		
Traditional	1	1		
Ethnic Group				
Igbo	84	83.2		
Hausa	8	7.9		
Yoruba	9	8.9		
Place of Residence				
Urban	59	58.4		
Rural	42	41.6		
Educational Qualification				
No School	8	7.9		
Secondary	21	20.8		
Tertiary	72	71.3		
Occupation				
Students	10	9.9		
Civil Servants	42	41.6		
Self-Employed	36	35.6		
Unemployed	13	12.9		
Monthly Income				
Poor Income (<10,000)	21	20.8		
Middle Income (10,000-100,000)	46	45.5		

Good Income (>100,000)	34	33.7
Number of Children		
None	12	11.9
1-2	39	38.6
3-4	34	33.7
5 and above	16	15.8
Husband's Occupation		
Faith based worker	10	9.9
Business man	42	41.6
Unemployed	11	10.9
Civil servant	38	37.6

Table2: The data indicates that among the respondents, 61(60.4%) reported experiencing some form of disrespect or abuse during childbirth, while 40(39.6%) did not. Various types of mistreatments were identified by those who experienced abuse: verbal abuse was the most prominent 32(52.5%), followed by non-consented care 10(16.4%).

Table 2: Prevalence of disrespect and abuse of the respondents

n = 101

Variable	Frequency	Percent	Mean	SD			
Disrespected or abuse during childbirth							
Yes	61	60.4					
No	40	39.6					
If Yes, what type of abuse or disrespect did you experience during childbirth?							
Physical abuse	3	4.9					
Non consented care	10	16.4					
Non confidential care	4	6.6					
Non dignified care	2	3.3					
Abandonment	3	4.9					
Discrimination	7	11.5					
Verbal abuse	32	52.5					
	SD	D	UD	A	SA		
I received an episiotomy without my consent	40.6	22.8	15.8	15.8	5	2.22	1.27
I was slapped on my thigh/face during childbirth by the health care provider.	35.6	23.8	13.9	19.8	6.9	2.39	1.33
I was scolded (shouted at) by the health care provider.	22.8	11.9	10.9	30.7	23.8	3.21	1.51
The facilities available in the labour room are not sufficient to maintain my privacy.	34.7	19.8	19.8	10.9	14.9	2.51	1.44
The healthcare practitioner was rude and used harsh words on me.	21.8	11.9	17.8	16.8	31.7	3.25	1.55

Table 3: shows the various forms of mistreatment. Majority agreed that the health care provider used harsh words on them with mean score of (3.37±1.55), followed by was scolded by the health care provider with mean score of (3.36±1.56), The health care provider was rude on me with mean score of (3.28±1.56) and Episiotomy was performed without consent (2.5±1.38).

Table 3: Various forms of maltreatment

n = 101

Variable	SD	D	UD	A	SA	Mean	SD
I was slapped by the health care provider.	39.6	31.7	12.9	10.9	5.0	2.1	1.19
I was punched by the health care provider.	34.7	38.6	9.9	8.9	7.9	2.17	1.23
I was hit with an object by the health care provider	41.6	32.7	16.8	2	6.9	2.0	1.14
I was scolded by the health care provider	21.8	9.9	12.9	21.8	33.7	3.36	1.56

The health care provider was rude on me.	21.8	12.9	13.9	18.8	32.7	3.28	1.56
The health care provider used harsh words on me.	20.8	7.9	22.8	10.9	37.6	3.37	1.55
Episiotomy was performed without my consent.	31.7	22.8	22.8	8.9	13.9	2.5	1.38
I was injected without my consent.	33.7	17.8	28.7	12.9	6.9	2.42	1.27
Vaginal examination was done without my consent.	38.6	28.7	20.8	2	9.9	2.16	1.25
I was not given pain relief medication because I didn't have money.	34.7	31.7	20.8	5.9	6.9	2.19	1.18
I wasn't attended to because I haven't deposited any money.	36.6	30.7	21.8	5.9	5.0	2.12	1.13
I wasn't given any medication because the hospital doesn't have it.	31.7	28.7	29.7	6.9	3.0	2.21	1.06

Table 4: shows the overall childbirth experience of the mothers, majority agreed that they expectations for the childbirth experience were met with mean score of (3.32±1.25), followed by would recommend this hospital to others for childbirth (3.29±1.24), was satisfied with my experience during childbirth (3.18±1.39), I felt confident in the staff's ability to provide care (3.08±1.39).

Table 4: Overall childbirth experience **n = 101**

Variable	SD	D	UD	A	SA	Mean	SD
I was satisfied with my experience during childbirth.	16.8	14.9	24.8	20.8	22.8	3.18	1.39
Would recommend this hospital to others for childbirth.	8.9	18.8	27.7	23.8	20.8	3.29	1.24
My expectations for the childbirth experience were met.	10.9	10.9	36.6	18.8	22.8	3.32	1.25
Overall, I felt well cared for during my stay.	15.8	19.8	25.7	19.8	18.8	3.06	1.17
I felt safe and secure during my stay.	13.9	24.8	20.8	24.8	15.8	3.04	1.3
I felt confident in the staffs' ability to provide care.	17.8	18.8	20.8	22.8	19.8	3.08	1.39
I felt that the staff took my individual needs into account.	20.8	17.8	25.7	14.9	20.8	2.97	1.42
I would choose this hospital again for further childbirth	25.7	12.9	26.7	18.8	15.8	2.86	1.42

Table 5: Majority agreed that the health care provider was rude and used harsh words on them with mean score of (3.26±1.53), followed by was given episiotomy at several points because there was no equipment to assist delivery manually with mean score of (2.76±1.37), poor staffing either shortage of healthcare manpower (2.76±1.29), poor communication between patients and health care providers (2.71±1.42), experienced a very painful vaginal examination because of the health care provider's inadequate knowledge and skill (2.69±1.41).

Table 5: Factors contributing to mistreatment **n = 101**

Variable	SD	D	UD	A	SA	Mean	SD
I was discriminated by the health care provider because of my age.	37.6	29.7	15.8	6.9	9.9	2.22	1.29
The health care provider was rude and used harsh words on me.	19.8	17.8	8.9	23.8	29.7	3.26	1.53
I was discriminated by health care provider because of my religion and ethnic group.	39.6	27.7	20.8	4	7.9	2.13	1.21
I experienced a very painful vaginal examination because of the health care provider inadequate knowledge and skill	27.7	22.8	13.9	23.8	11.9	2.69	1.41
My privacy was not respected.	30.7	28.7	12.9	19.8	7.9	2.46	1.32
I was maltreated because of my HIV status	50.5	22.8	9.9	9.9	6.9	2	1.28
I was slapped or punched because I hesitated to obey	47.5	21.8	12.9	9.9	7.9	2.09	1.31

instructions by the health care provider.							
I was neglected because I couldn't express myself to the understanding of the health care provider (e.g. by shouting aloud, crying or screaming)	37.6	17.8	17.8	17.8	8.9	2.43	1.38
I was neglected because I couldn't afford the cost of services	38.6	26.7	19.8	11.9	3	2.14	1.15
I wasn't given any pain relief because it wasn't available.	23.8	26.7	27.7	14.9	6.9	2.54	1.2
I was given episiotomy at several points because there was no equipment to assist delivery manually.	25.7	16.8	25.7	18.8	12.9	2.76	1.37
Malfunctioning equipment made my monitoring stressful and discomforting.	24.8	22.8	33.7	11.9	6.9	2.53	1.19
I was refused a birth companion because it is against the hospital policy.	28.7	29.7	22.8	10.9	7.9	2.4	1.23
I was asked not to object instruction and I was treated as a passive participant during childbirth because of the hospital policy.	27.7	28.7	21.8	11.9	9.9	2.48	1.29
I was asked to pay fees that I couldn't explained its need.	35.6	14.9	24.8	15.8	8.9	2.48	1.35
Lack of basic amenities like electricity and water	38.6	15.8	24.8	11.9	8.9	2.37	1.34
Poor communication between patients and health care providers	26.7	22.8	18.8	15.8	15.8	2.71	1.42
Poor staffing either shortage of healthcare manpower	21.8	23.8	19.8	25.7	8.9	2.76	1.29
Bribery and corruption. Example refusal to bribe the health care provider.	38.6	26.7	18.8	6.9	8.9	2.21	1.28

DISCUSSION

The study highlights is that 60.4% of participants experienced disrespect or abuse during childbirth. The findings conform to that of Abuya⁹, who found out that 28% of women reported at least one type of D & A during hospital delivery. Verbal abuse was most common (52.5%), and scenarios like episiotomies without consent, slapping, scolding, privacy concerns, and use of harsh language generated various responses. Responses to satisfaction and recommendation of the hospital for childbirth varied, while concerns about discrimination, inadequate knowledge of healthcare providers, privacy violations, and insufficient care were notable. However, the study is at variance with Hodin¹⁰, who identified normalization of Disrespect and Abuse in facility-based childbirth, financial barriers, women's lack of autonomy and empowerment, poor quality clinical training related to provider patient interaction, a lack of national laws or policies and health care workers demoralization due to weak health systems as commonly cited contributing factors. However, the study is consistent with similar studies conducted by Bohren¹¹, who conducted a study to create and implement reliable tools for measuring mistreatment during childbirth. Additionally, Bohren¹¹. noted that this mistreatment, in the form of physical and verbal abuse, reached its peak from 30 minutes before birth until 15 minutes after birth.

In addition, the results indicated that a larger percentage of the participants (77.3%) underwent episiotomy without giving their consent. These results also align with those of Ijadunola⁵ who conducted a study on revealing disrespect and mistreatment during facility-based childbirth. In their research, they discovered that 50% of the respondents were above 30 years old and had attained tertiary education. Furthermore, these individuals were less likely to experience verbal abuse, which is consistent with the current findings.

These finding are in contrast with the findings of Iruo¹² on the study to determine the level of disrespect and abuse of women during childbirth. Bohren¹³ stated that many women did not consent for episiotomy despite receiving these procedures.

CONCLUSION

The study reveals a significant prevalence of disrespect and abuse during childbirth in selected hospitals in Nsukka, Enugu state - Nigeria was high with 61(60.4%) of women experiencing at least one form of disrespect and abuse. However, the types of disrespect and abuse experience by mothers differs but the predominant ones were that the health care provider used harsh and derogatory words on the respondents, scolded by the health care provider, women were left naked in the view of many staff and health care providers were been rude on the respondents with verbal abuse as a prevailing issue. Respondents' experiences vary across specific scenarios, revealing a range of attitudes towards mistreatment. This suggests a pressing need for improved maternal care and proper training of healthcare providers. Addressing privacy concerns, discriminatory practices, and enhancing communication between patients and providers are crucial to ensuring respectful and dignified childbirth experiences.

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