How do men experiment the decision making about their partner’s labor induction?

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Introduction

In French-speaking Switzerland around one birth out of every three is induced (OFSP, 2019).

Ideally, such a situation should be handled through a shared medical decision (HAS, 2013; NICE, 2020) with regard to the health benefits and risks for the mother-to-be and the newborn (Boulvain & Jastrow Meyer, 2015).

It is recommended to include fathers-to-be in this decision-making as the privileged partner of the pregnant woman (Bohren et al. 2019) and the father of the unborn child (Family Included, 2016; Gallagher & Wise, 2012).

However, no study to date has looked at this process from the men's point of view.

Méthod***: a phenomenological study

Seven semi-structured interviews were conducted with fathers-to-be via the Zoom application from June to August 2020.

Their partner’s labor induction was scheduled the same day or the day after, in the maternity ward at Geneva University Hospitals.

Each interview was transcribed verbatim and then data analysis was carried out using the Giorgi’s method (1985) and the Maxqda 2018 software.

Double coding was made to improve the reliability and validity of the research.

Objective

Describing men's experience in the decision-making process leading to induction of labor in their partner.

Results

Conclusion

Professionals can strengthen the role of men in this process by giving the couple time for discussion before the final decision is made.

A perceived lack of choice or a lack of information on the benefits and risks of labor induction worsens the experience of the father-to-be: avenues for improvement should be considered to upgrade a good shared medical decision.

New studies are needed to understand better the space given to men in perinatal decision-making processes.

References


***This poster is based on the results of a Master Thesis conducted within the joint decision course in Science of Health Sciences of HES-SO (University of Applied Sciences and Arts Western Switzerland) and University of Lausanne (UNIL), major in midwifery, at HES-SO Master.

Special thanks to Professeur Begoña Martinez de Tejada, chefie de la maternité des HUG, Madame Bérangère Pierret, responsable des soins de la maternité, Madame Claudie Godart, sage-femme cadre du service des consultations de la maternité des HUG, ainsi que l’ensemble des sages-femmes ayant participé au recrutement.


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