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# Caring for women making unconventional birth choices: A meta-ethnography exploring the views, attitudes and experiences of midwives.

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## Background

Women can face opposition when exerting autonomous decision-making regarding their birth choices, particularly when the decisions involve going against medical advice. Termed **'unconventional birth choices'**, the aim of this meta-synthesis was to explore this phenomenon from the midwives' perspectives to illuminate insights relating the midwives' views, attitudes and experiences of caring for such women.

## Methods

The meta-synthesis involved a predesigned systematic search strategy conducted via nine bibliographic databases as well as additional search techniques. Inclusion and exclusion criteria were applied. **Five studies** were included into the review from the UK (n=3), Australia (n=1), and an international study (n=1). Quality assessments were carried out and the data synthesis adopted Noblit and Hare's meta-ethnographic methods. .

## Key Findings

Three third order interpretations were developed: **'Perceptions of women's decision-making'** expresses the conflicting and contradictory perceptions and understandings of women's previous experiences and the mother-baby dyad; **'Conflicting tensions as caregivers'** conveys the different sources of fears and opposing frustrations experienced by midwifery staff; **'Ways of working with-woman'** describes the midwives' perspectives on the central role of relationships to caregiving.

## Theme 2: 'Conflicting tensions as caregivers'



"If anything happens [poor maternal or fetal outcome] and I'm working outside of [hospital policies ... then I am not covered by vicarious liability. So then, there goes my house!'"

### Fears and vulnerabilities

In three studies, employed midwives reported professional, medico-legal, and personal stress and vulnerabilities when women declined recommended care.



'What we're doing is putting people into categories and institutionalising them via our guidelines and making people afraid if you come out of guidelines'

### The constraints of arbitrary restrictions

Some midwives reported entirely different sources of frustration and anger. Some employed midwives reported that it was the guidelines that were perceived to be problematic, creating unnecessary fears for professional.



"I guess practitioners, midwives particularly, just relax a little bit more if a senior doctor has spoken to her about the risks. . . That's probably the. . . advantage of them [antenatal care plans]"

### Managing the tensions

For employed midwives, a primary method of managing the stress associated with medico-legal concerns was scrupulous documentation, to demonstrate that appropriate care was provided in accordance with the woman's wishes.

## Line of Argument

The extent to which midwives are either willingly facilitative or reluctantly accepting of women's unconventional birth choices appears to be informed by the degree to which they value women's autonomy over institutional norms and fetal rights, and over their own personal psychosocial wellbeing. For some, their positioning was also influenced by vulnerabilities associated with professional accountability, subsequent litigation, and actual or potential reprisals arising from adverse events.

## Conclusion

The findings suggest that midwives' views are conflicting and contradictory, illuminating barriers and facilitators that midwives experience when caring for such women. While this study does not offer conclusive findings, it does contribute nuanced perspectives to the discourses surrounding women's choices, midwifery practice and respectful maternity care..

## Primary study

**Practising 'outside of the box' whilst within 'the system'.**

A feminist narrative inquiry of NHS midwives facilitating and supporting women's unconventional birth choices in the UK.

Currently ongoing.

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