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Family-Centred Maternity and Newborn Care

Midwifery & Obstetrical Nursing

Respectful maternity care, birth companionship, informed consent, maternal mental health, parent education, newborn bonding and family participation in care.

For educational purposes only.

CHAPTER 24 / MIDWIFERY AND OBSTETRICAL NURSING 24. Family-Centred Maternity and Newborn Care

1. Respectful maternity care

Provide childbirth care that protects dignity, privacy, confidentiality, informed choice, freedom from abuse/discrimination and access to support. Explain options, benefits/risks and procedures in accessible language; ask permission for examination, ensure chaperone if appropriate and respect refusal. Use shared decisions with woman and family only as she wishes. No verbal abuse, coercion, unnecessary exposure or nonconsented teaching examinations.

2. Birth companionship and supportive care

A chosen companion may provide emotional and practical support where safe and feasible. Clarify role and privacy/IPC expectations, avoid excluding without justified safety reason. Support mobility, comfortable positions, pain-relief choice, nutrition/hydration as clinically appropriate, reassurance based on facts and continuous communication during emergency/referral. Provide interpreter when needed.

3. Maternal mental health

Assess mood, anxiety, sleep, trauma, support, prior mental illness and safety using appropriate screening/referral. Baby blues may be transient; persistent distress or functional impairment needs evaluation. Severe confusion, hallucinations or self-harm/baby-harm intent is urgent. Protect safety, escalate and provide compassionate professional treatment. Avoid suggesting ordinary distress reflects poor motherhood.

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B.SC. NURSING / CHAPTER-WISE STUDY NOTES

4. Bonding and parent education

When stable encourage immediate skin-to-skin, early feeding support, responsive caregiving and rooming-in where appropriate. Involve partners/other caregivers with consent in newborn hygiene, safe sleep, warmth, feeding and recognition of danger signs. Provide special support for premature/sick newborns and mothers after operative birth. Respect cultural values while explaining harmful practices and safe alternatives. Recognize caregiver burden and link resources.

5. Nursing application and evaluation

Use teach-back for discharge instructions, discuss emergency contacts and follow-up, invite questions and document preferences/consent. Evaluate experience and care outcomes including communication, pain, safety and ability to care for baby. When pregnancy loss/stillbirth occurs provide sensitive bereavement, options for memory support if desired and confidential follow-up. Respect all family structures and decisions.

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6. Important Examination Questions

Long Answer Questions

1. 1. Discuss respectful maternity care, birth companionship and family-centred nursing.

Short Answer Questions

1. 1. Explain informed consent
2. 2. describe maternal mental health and bonding
3. 3. discuss parent education.

Very Short Answer Questions (with answers)

1. 1. Is consent needed for vaginal examination? - Yes, except specific lawful emergency circumstances.
2. 2. Who chooses support person when feasible? - The woman.

7. Quick Revision

- Respectful care is a safety and rights issue.
- Support parents without coercion.
- Mental health is part of maternity care.

8. Conclusion

Respectful care is a safety and rights issue. Support parents without coercion. Mental health is part of maternity care.

Practice questions

Choose one best answer. The answer key and explanations follow the questions.

1. How should family involvement in maternity decisions be determined?

A. According to the woman's wishes
B. Automatically by the oldest relative
C. Exclusively by the birth companion
D. By assuming all family members share the same preferences

2. Which action supports bonding when mother and newborn are stable?

A. Routine separation without a clinical reason
B. Immediate skin-to-skin and responsive caregiving
C. Delaying all feeding support until discharge
D. Preventing caregivers from learning newborn care

3. Which outcome should be considered when evaluating family-centred maternity care?

A. Only the number of procedures completed
B. Only the speed of discharge
C. Communication, pain, safety and ability to care for the baby

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D. Only the absence of questions from the family

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Answer key and explanations

1. A - According to the woman's wishes

The woman decides how family participate in shared decisions.

2. B - Immediate skin-to-skin and responsive caregiving

Skin-to-skin, early feeding and responsive care support bonding.

3. C - Communication, pain, safety and ability to care for the baby

Evaluation includes experience, safety and practical caregiving ability.

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