

**PACIFIC LUTHERAN UNIVERSITY
SCHOOL OF NURSING
N370 OB CLINICAL ROTATION
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JOURNAL ARTICLE PRESENTATION

By Ilia Mondoy

Assignment: The student will choose an article from a nursing journal that relates to the current clinical assignment, i.e. maternal/newborn issues. Using the following format the student will present this article during clinical conference. The article should be either research based or geared to clinical practice.

Title of Article: The Culture of Pregnancy and Infant care in African America Women: An Ethnographic Study

Source: (NURSING journal title): Journal of Transcultural Nursing 2007; 18; 215

Authors: Savage, C.L., Anthony J, Lee R, Kappesser M.L., & Rose B.

Problem/Purpose: Infant mortality rate for African Americans in 2002 was 18.1 per 1000 live births vs. 14.4 overall for U.S. In 2000, IFR for African Americans is 13.5/1000 vs. 6.3/1000 for whites. Contributing is higher rate of PTD. In order to develop more effective interventions- learn more about culture of pregnancy and infant care specific to population.

The purpose is to explore cultural contexts of prenatal and infant care practices among African American women of childbearing age living in an African American urban community located in Hamilton County Ohio. There is a need to determine the underlying risk factors specific to the population of interest, because programs effective in one area are proven to be ineffective or detrimental in others.

Design: Ethnographic study conducted using a community-based participatory research study.

Nominated sampling method. The study collected and analyzed the life histories of the participants in order to extrapolate the cultural norms for this particular group.

Subjects: Community is an urban neighborhood in Hamilton. 2000, 84% African American, 60% female, 78% of families had no husband present, 83% live below poverty level. 95% of infants born were African American, 9.9% infants born prematurely, and 20% received no prenatal care.

A partnership of 3 women residing in the community, community parish nurse, 2 researchers from the college of nursing, and 4 representatives from; a child health policy agency, a co-op multihospital driven initiative to dec. infant mortality, nurse from public health and community medical clinic.

Included: African American female resident 18-44 with one pregnancy in the past year who could understand English. Two mothers were recruited, who had information on eligible participants from the community. They then randomly selected 7 women from

the community, pregnant or recently given birth. Ages were 22-31, with an mean age of 25.6.

Results: Three themes identified:

Help and support from women

Importance of help and support from women in their family. Struggling women had less family support while women “doing well” had more. Frequently mentioned benefit of support and help. Struggling parents spoke of lack of support.

In second interview, confirmed support was important, and what support was provided, such as childcare, transportation, and infant care supplies.

Isolation- lack of transportation and safety

Lack of transportation- no participants owned a car at the beginning of the study, and long bus trips makes travel undesirable. For clinic visits, the mothers had to bring their children and wait for many hours. “Waste of time.” One participant bought a car during the study and stated that it reduced her commute by 1.5 hours.

Safety- fear of neighborhood. Bottom of hill less safe than projects at the top of the hill. Parents stay inside and keep children inside as well.

Unplanned/Unwanted pregnancies

Of the seven interviewed, 5 stated a pregnancy was unplanned and a disturbance to their future plans. While they understood the importance of prenatal care, there was a common anecdotal care that women in their community would avoid prenatal care in the hopes of inducing a miscarriage.

Conclusions:

The participants all fit the criteria, but there was not enough help understand the underlying cultural contexts, and did not discover why they all didn't have preterm infants. The study did uncover three themes that may assist in further explaining the cultural context of pregnancy and infant care practices in this community.

Findings are consistent with a study where pregnancy was a catalyst that increased perception of magnitude of preexisting social stressors, such as high percentage of households headed by women. Strong social networks served as a protective factor.

It seems that prenatal care is difficult to endorse if the pregnancy is unwanted or unplanned.

Adds to literature that there needs to be a reevaluation as to how prenatal care is delivered, studies need to be conducted and individualized for the targeted community, and that there is an importance to the social network of women, especially women who are head of household.

This study also has findings that should be further evaluated, the perception that prenatal care is not desirable if the pregnancy is unwanted, and lack of transportation can be a barrier to prenatal visits.

Application to Practice:

MSS has a program that women who do not have transportation are given a bus pass to enable them to reach their visit.

Stress the importance of prenatal visits even if the pregnancy is unwanted/unplanned. Rather than just a miscarriage, make patients aware of consequences of low birth weight, and time and expense involved with children born with numerous medical problems.

Be sensitive and nonjudgemental to patients who may not want pregnancy, and supportive of their decision, even if it is to terminate a pregnancy.

In communities, start parenting support groups/ play dates/ co-op, and make a social support network for women who need it.