

## Women's perception of husbands' support during pregnancy, labour and delivery

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**Abstract:** This study described women's perception of husbands' support during pregnancy, labour and delivery in selected hospitals in Ogun state. A descriptive survey design method in which questionnaire with closed ended questions were randomly distributed to 200 women attending the antenatal and infant welfare clinics of four hospitals in Ogun state. Data was analyzed using SPSS 16.0. Findings of the study showed that majority of the participants were between ages 24-29(42%) and 41% were having their first pregnancies. 96.5% of all the participants agreed that husbands' support during pregnancy, labour and delivery was necessary. 96.5% of the participants were encouraged by their husbands support, 86.5% said that their husbands support made pregnancy less stressful for them and 94.5% said that their husbands' provision of their needs gave them emotional security. Additionally, 83.5% of the participants understood that lack of husbands support during pregnancy, labour and delivery was dangerous. It was however discovered that even though men are generally supportive of their pregnant wives, very few of them are directly involved in the maternity care of their wives, as only 42% of the women were accompanied for antenatal visits. Thus, special programmes must be organized for the husbands of pregnant women to increase their knowledge and awareness about the physical, emotional and socio-economical needs of their pregnant wives, emergency obstetric conditions, and engaging them in birth preparedness and complication readiness.

**Keywords:** Delivery, Husbands, Labour, Pregnancy, Support

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### I. Introduction

Pregnancy and childbirth continue to be regarded as exclusively women's affairs in most African countries. Men generally do not accompany their wives for antenatal care, neither are they expected nor encouraged to be in the labour room during delivery<sup>[1]</sup>. The role of men in maternity care in Africa is understudied, despite their economic dominance and decision-making power.

In sub-Saharan Africa, pregnancy and childbirth continue to be viewed as solely a woman's issues<sup>[2]</sup> and maternal health issues have predominantly been seen and treated as a purely feminine matter<sup>[3]</sup>. Besides these, most men have not succeeded in providing total and holistic care and support for their pregnant wives in three major aspects of optimum health which are; physical, emotional and socio-economical. Studies have however consistently demonstrated that husbands' support in prenatal care is the most essential factor in promoting the health of pregnant mothers and infants as well as reducing maternal and infant mortality during pregnancy, labour and delivery, thereby improving maternal health and reducing maternal mortality from pregnancy induced hypertension, abortion-related complications, post-partum hemorrhage, obstructed labour and puerperal psychosis<sup>[3][4]</sup>.

Men's participation in maternal and child health (MCH) care services is low. Studies have observed that men play a vital role in the safety of their female partners' pregnancy and childbirth<sup>[2][3]</sup>. Moreover, the exclusion of men from MCH services reinforced the erroneous notion that pregnancy and childbirth were uniquely feminine and maternity units as exclusively meant for women<sup>[5]</sup>. Studies have consistently demonstrated that husbands' role in prenatal care is the most essential factor in promoting the health of pregnant mothers and reducing maternal and infant mortality during pregnancy and delivery periods<sup>[4]</sup>, and this makes men critical partners in the improvement of maternal health and reduction of maternal mortality. Additionally, most researches on male involvement in reproductive health in Africa have shown a significant improvement in pregnancy outcomes when women were supported by their husbands during the various stages of maternity<sup>[4]</sup>.

Strategies for involving men include raising their awareness about the physical, emotional and socio-economical needs of the pregnant woman, emergency obstetric conditions, and engaging them in birth preparedness and complication readiness<sup>[1]</sup>. According to them, this is based on the premise that increased awareness of men will increase their physical, emotional and socio-economical support of their wives, and

enable them support early spousal utilization of emergency obstetric services, which would reduce the incidences of hypertensive disorders and psychiatric problems in pregnancy.

As in many African countries, Nigerian men are socially and economically dominant and they exert a strong influence over their wives, determining the timing and conditions of sexual relation and family size [2]. As in many other patriarchal societies, pregnancy, childbirth and child-care are regarded as exclusively women's affairs in Nigeria. Because of this disturbing trend, the International Conference on Population and Development (ICPD) urged that special efforts should be made to emphasize men's shared responsibility and promote their active involvement in maternity care [1].

This study therefore intends to investigate the perceptions of women of childbearing age in Ogun state of husband's or partner's support of their spouses during pregnancy, labour and delivery. The study targets women of child bearing age who have had one or more pregnancies because they are in the best position to report ways in which their husbands supported them during pregnancy, labour and delivery, and also the effect it had on the outcome of their pregnancies.

### Research questions

1. Do women in selected hospitals in Ogun state consider husbands' support during pregnancy, labour and delivery as important?
2. What do women in selected hospitals in Ogun state consider to be the effect of husbands' support during pregnancy, labour and delivery?
3. In what ways do husbands of women in selected hospitals in Ogun state support their wives during pregnancy, labour and delivery?
4. What do women in selected hospitals in Ogun state consider to be the dangers of lack of husbands' support during pregnancy, labour and delivery?

### Research Hypotheses

1. Women's perception of the effects of husbands' support (reduction of stress) during pregnancy, labour and delivery will not be significantly influenced by the number of pregnancies they have had.
2. Women's perception of the effects of lack of husbands' support (emotional disturbance) during pregnancy, labour and delivery will not be significantly influenced by the number of pregnancies they have had.

## II. Methodology

This is a descriptive survey design study aimed to determine women's perception of husbands support during pregnancy, labour and delivery. A total of 200 women of child bearing age (18 to 35) who must have had one pregnancy, who attended antenatal clinics from four selected hospitals were selected to participate in this study using accidental sampling technique. Questionnaires that assessed women perception of the importance of husband support, perceived effect of husbands support on health and general wellbeing of the women, ways by which husbands supported their wives, and perceived dangers of lack of husbands support during pregnancy, labour and delivery was administered to women after ethical approval was given and verbal consent was gained from participants. Content validity of instrument was ensured by ensuring that items in the questionnaires were based on extensive review of literature. Reliability was affirmed by documenting all procedures carried out in the development and implementation of the study.

Guidelines for the completion of the questionnaires were explained and participants were instructed to tick where appropriate. Completed questionnaires were collected and coded for analysis. Data was analyzed using descriptive statistics of tables with tables and percentages, and inferential statistics of Chi-square to test the 2 hypotheses at 0.05 level of significance. Statistical Package of Social Science (SPSS 16.0 version) was used.

## III. Results

**Table 1: Demographic Characteristics of Participants**

Age in years	Frequency (n= 200)	Percent (%)
18-23	40	20.0
24-29	84	42.0
30-35	62	31.0
>35	14	7.0
Total	200	100.0
Religion	Frequency	Percent (%)
Christianity	156	78.0
Islam	42	21.0
Traditional	2	1.0
Total	200	100.0

Ethnicity		Frequency	Percent
	Yoruba	151	75.5
	Hausa	14	7.0
	Igbo	31	15.5
	Others	4	2.0
	Total	200	100.0
Number of pregnancies		Frequency	Percent (%)
	1	82	41.0
	2	55	27.5
	3	38	19.0
	4	13	6.5
	5	3	1.5
	>5	8	4.0
Missing	1	1	0.5
	Total	200	100.0
Health Institution		Frequency	Percent (%)
	Hospital 1	50	25.0
	Hospital 2	50	25.0
	Hospital 3	50	25.0
	Hospital 4	50	25.0
	Total	200	100.0

Table 1 showed that majority of the participants 84(42%) and 62 (31%) were between ages 24-29 and ages 30-35. 82 participants (41.0%) were having their first pregnancies; 55 participants (27.5%) had 2 pregnancies; 38 participants (19.0%) had 3 pregnancies; 13 participants (6.5%) had 4 pregnancies; 3 participants (1.5%) had 5 pregnancies and 8 participants (4%) had more than 5 pregnancies.

**Table 2: Responses of participants on importance of husbands' support during pregnancy, labour and delivery**

Statement	Agree		Disagree	
	frequency	percentage	frequency	percentage
Husbands' support during pregnancy, labour and delivery is necessary.	193	96.5%	7	3.5%
Women do not need husbands support during pregnancy, labour and delivery.	40	20%	160	80%

Table 2 showed that 193 participants (96.5%) agreed that husbands' support during pregnancy, labour, and delivery is necessary. Majority of the participants 160 (80%) disagreed to the statement not needing husbands support during pregnancy, labour, and delivery. Thus, women perceive the importance of husbands' support as vital during this period.

**Table 3: Responses of participants on the positive effects of husbands' support during pregnancy, labour and delivery**

Statement	Yes		No	
	frequency	percentage	frequency	percentage
Encouraged by husband's support	193	96.5%	7	3.5%
Husband's support makes pregnancy less stressful	173	86.5%	27	13.5%
Husband's provision of needs gives emotional security	189	94.5%	11	5.5%
Husband responded positively to the news of the pregnancy	180	90.0%	20	10.0%

Table 3 described the participants' response on the positive effects of husbands' support. 193 participants (96.5%) said they were encouraged by their husbands support, 173 participants (86.5%) said that their husbands support made pregnancy less stressful for them, 189 participants (94.5%) said that their husbands' provision of their needs gave them emotional security. These positive effects bring about improved pregnancy outcomes.

**Table 4: Responses of participants on the negative effects of husbands' support during pregnancy, labour and delivery**

n=200Statement	Yes		No	
	frequency	percentage	frequency	percentage
Lack of sleep because of lack of support	40	20.0%	160	80%
Frequent headaches because of lack of support	28	14.0%	172	86.0%
Emotional disturbance due to lack of support	38	19.0%	162	81.0%
My husband responded negatively to the news of the pregnancy	23	11.5%	177	88.5%

Table 4 above described the negative effects of lack of husbands' support during pregnancy, labour, and delivery. Majority of the respondents did not report experiencing negative outcome from lack of support from husbands. This may be due to having a strong support from husbands as shown in TABLE 3.

**Table 5: Responses of the participants on ways by which their husbands give support**

Statement	Yes		No	
	frequency	percentage	frequency	percentage
encouraged to book at the ante natal clinic on time	189	94.5%	11	5.5%
Provides my financial needs	194	97.0%	6	3.0%
Accompanies to the ante natal visits	84	42.0%	116	58.0%
Buys fruits and vegetables when returning from work	185	92.5%	15	7.5%
Gives back massages	157	78.5%	43	21.5%
Assists with household chores	165	82.5%	35	17.5%
Assists in shopping for baby things	130	65.0%	70	35.0%
Says kind words when tired	164	82.0%	36	18.0%
Shares life style changes	114	57%	86	43%
Practices breathing exercises	99	49.5%	101	50.5%
Present at the birth of the baby	152	76%	48	24.0%

Table 5 showed that 189 participants (94.5%) said they were encouraged to book at the antenatal clinic on time, 194 participants (97.0%) said their financial needs were provided, 84 participants (42.0%) said they were accompanied to the antenatal visits, 185 participants (92.5%) said that fruits and vegetables were bought for them, 157 participants (78.5%) said they were given back massage, 165 participants (82.5%) said they were assisted with house chores, 130 participants (65.0%) said they were accompanied to go shopping for baby things, 164 participants (82.0%) said that kind words were said to them when tired, 114 participants 57% said lifestyle changes were shared, 99 participants (49.5%) said their husbands practiced breathing exercises with them and 152 participants (76%) said their husbands were present at the birth.

**Table 6: Responses of participants showing dangers of lack of husbands support**

Statement	Agree		Disagree	
	frequency	percentage	frequency	percentage
Lack of husbands' support is dangerous.	168	84%	32	16%
First trimester miscarriage may result from lack of husbands' support	147	73.5%	53	26.5%
Poor emotional health can lead to hypertension in pregnancy	188	94%	12	6%
Poor emotional health can lead to mental breakdown in pregnancy	183	91.5%	17	8.5%
Poor physical and mental health can adversely affect the growing baby.	180	90%	20	10%
Poor physical and mental health can lead to complications during labour and delivery.	186	93%	14	7%

Table 6 showed that 168 participants (84%) understood that lack of husbands support during pregnancy, labour and delivery is dangerous and the dangers that could arise from lack of husbands support were identified. They agreed that the following anomalies can occur as a result of lack of husbands' support: miscarriage during the first trimester (147 participants, 73.5%), hypertension in pregnancy (188 participants, 94%), depression and mental breakdown in pregnancy (183 participants, 91.5%), fetal problems (180 participants, 90%) and complications during labour and delivery (186 participants, 93%).

Chi-square test measuring the women's perception of the effects of husbands' support (reduction of stress and emotional disturbance) during pregnancy, labour and delivery and the number of pregnancies revealed a value of  $X^2$  0.803 and 0.054 which is less than the critical value of 2.322 and 10.853, at a degree of freedom of 5, and a p-value set at 0.05 level of significance. Thus, the hypothesis is supported in which

women's perception of the effects of husbands' support during pregnancy, labour and delivery will not be significantly influenced by the number of pregnancies they have had. Therefore, women's perception of the effects of husbands' support remains constant, irrespective of the number of pregnancy they had. Additionally, women's perception of the effects of lack of husbands' support remains constant, irrespective of the number of pregnancies they have had.

#### **IV. Discussion**

200 women attending antenatal clinics participated in this study. Results revealed that women from the four selected hospitals in Ogun state considered husbands' support during pregnancy, labour and delivery important. Some of the effects of husbands support described by the women are encouragement, emotional security and lower level of stress. This is similar to the findings of Nwokocha<sup>[4]</sup>, who said that most research in the field of male involvement in reproductive health in Africa has shown a significant improvement in pregnancy outcomes when women were supported by their husbands during pregnancy, labour and delivery. Additionally, the author noted that husbands' support in prenatal care is the most essential factor in promoting the health of expectant mothers which if lacking, leads to a rise in maternal mortality from pregnancy induced hypertension, abortion-related complications, post-partum hemorrhage, obstructed labour and puerperal psychosis<sup>[4]</sup>.

Women described their husbands' support to be manifested in many ways. Majority of the study participants (94.5%) were encouraged by their husbands' to book at the antenatal clinic on time. 194 (97%) were financially supported by their husbands and 185 (92.5%) were pampered with purchasing fruits and vegetables for them. Moreover, the husbands also engaged in assisting with house chores (82.5%) and 164 (82%) received kind words from their husbands. This finding is synonymous to the finding of Reddamma<sup>[6]</sup> who noted in a study that husbands provided support in the following ways: fetching water, bringing nutritious food, arranging and accompanying their wives at prenatal care visits, advising their pregnant wives not to carry heavy loads and providing money for transportation and medical costs. Therefore, husbands must be taught various methods of assisting and supporting their wives during pregnancy, labour, and delivery.

Some of the dangers of lack of husbands' support during pregnancy, labour and delivery as reported by the women in this study include miscarriage during the first trimester. 188 (94%) of the women reported the development of hypertension as a danger and possible complications during labour and delivery by 186 participants as a danger of lack of support. This finding is supported by Iliyasu et al<sup>[1]</sup> study in which antenatal women reported depression and emotional breakdown in pregnancy as a danger of lack of support from husband. Recommendations were made in their study that increased awareness of men will increase their physical, emotional and socio-economical support of their wives, and enable them support early spousal utilization of emergency obstetric services, which would reduce the incidences of hypertensive disorders and psychiatric problems in pregnancy, which are part of the dangers identified in this study<sup>[1]</sup>.

The findings have implications for nursing practice. The study revealed that many of the women understood the importance of husbands support during pregnancy, labour and delivery. Thus, it is necessary for nurses to emphasize how important it is for men to be involved and be supportive of their wives during pregnancy, labour and delivery. It is important that the percentages who did not totally understand the importance of husbands support be educated. Also, women should be encouraged by the nurses to bring their husbands for antenatal appointments because it was discovered in this study that 42% only were accompanied to the antenatal visits. This is important because if the men also attend the sessions, they will positively reinforce what their wives are taught, and also be alert to detect danger signs early. If this is done, more husbands will practice breathing exercises with their wives, as opposed to the 49.5% in this study, and they would also share lifestyle changes with their wives to promote a sense of shared responsibility for the pregnancy, as opposed to the 56% noticed in this study.

#### **V. Conclusion**

The findings of this study offer a better understanding about the importance of husbands' support and danger of lack of support during pregnancy, labour and delivery. The perception that some women may have that their pregnancy is theirs and theirs alone should be addressed and the women made to understand that no matter how strong they are, they still need the assistance of their spouses to encourage them, reduce their physical stress and also give them emotional security. It is therefore important that nurses encourage men to be more involved in the care of their wives during pregnancy, labour and delivery. A major sign of this involvement would be their presence at their wives antenatal appointments, which would enlighten the men more about their wives' pregnant state, and also foster a sense of shared responsibility for the pregnancy.

## **VI. Recommendations**

The study findings revealed that even though many of the women in this study were supported physically, emotionally and financially by their husbands, most of the women's husbands were not involved with their maternity care. Based on this finding, it is recommended that:

1. Special programmes be organized for the husbands of expectant women, to increase their knowledge and awareness about the physical, emotional and socio-economical needs of their pregnant wives, emergency obstetric conditions, and also engage them in birth preparedness and complication readiness.
2. It should be made mandatory for husbands of women receiving antenatal care to attend a stipulated number of sessions and appointments with their wives.
3. Women who are not accompanied to the antenatal clinic be followed up and visited at home to get the men involved.

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