

Abstract

Bouncing back? An ethnographic study exploring the context of care and recovery after birth through the experiences and voices of mothers.

Background.

There is an increasing evidence base concerning the need for effective and timely postnatal care to prevent physical and physiological maternal and infant morbidity, but there is little evidence of women's experiences of postnatal care or their views of their recovery after birth. The ethnographic study presented in this thesis sought to increase our understanding of the role of postnatal care and birth recovery over time through the experiences and voices of mothers.

Method.

The study was located in the neighbourhoods of Salford and Trafford in the North West of England. A period of participant observation in two maternity units using a continuum-based approach was undertaken to explore the influence of the context and environment of postnatal care on women's immediate recovery from birth. This was followed by in-depth conversational interviews with 17 women (three interviews were conducted with each woman) during the first seven months following birth.

Findings.

Analysis of observational and interview data revealed that initially the impact of power of place of birth impinged upon the celebration of birth as the atmosphere of the postnatal wards with their established rules and care ethos sought to confine women in an unhelpful way. The ward experience revealed contested views between the women and the staff in terms of needs and wants. Thus the promotion of choice and individualised care relied more on chance rather than a formal process of care available for all women.

During the provision of formal care giving, constructs of 'normal' were attached to women as midwives searched to manage the occupants of the wards (mothers and babies) and engaged in body regulation processes as a means to judge adaptation to motherhood and recovery.

Over time notions of 'self care' prevailed in that women learnt how to manage and cope with their own recovery from birth and adaptation to motherhood. The health and wellbeing outcomes that mattered to the women were centred upon the ways in which they interpreted motherhood and claimed back the self.

Conclusions.

This study reveals that the current planning and content of routine provision of postnatal care in hospital requires urgent revision. Women's expectations of their health and wellbeing and their needs in the early weeks and months after giving birth, differ from those understood by professionals who continue to adhere to a traditional and ritualistic provision of care. Midwifery needs to re-examine its role in postnatal care, take account of what women say and consider new ways of addressing care after birth.