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Brief Communication

Assessment of health facilities of Pune city, India, for delivering respectful maternity care

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INTRODUCTION

Ill-treatment, disrespect, and abuse are prevalent globally. A systematic review from India showed that the prevalence of ill-treatment at health facilities was 65.38% and at community settings, was 77.32%.[1] Various factors play a role in delivering respectful maternity care (RMC), including stakeholders involved, facilities, types of facilities, infrastructural issues, etc. Even though stakeholders want to provide RMC, there are factors at facilities that hinder the delivery of RMC. Only when these factors are identified and addressed, will it be possible to deliver RMC.[1]

Therefore, the objective of the study was to assess the health facilities in the city of Pune for selected characteristics and, thereby calculate the RMC index.

METHODOLOGY

The study was conducted in Pune, India, from January to August 2021. A total of twenty-four hospitals were approached for the study, of which ten declined to be a part, and four were made COVID centers due to the pandemic. Therefore, a total of ten hospitals were selected for the study, including six private and four government hospitals. The hospitals were selected after obtaining the consent from the respective hospitals' authorities. The study was approved by the Independent Ethics Committee of the University.

The hospitals were assessed for selected characteristics based on a checklist given by the International Childbirth Initiative.[2] The assessment was done by direct observation of the facilities. Further, the RMC index was computed. The RMC index was calculated based on the three components, including policy, facility, and experience. [3] Policy includes allowing a birth companion of choice, choosing a birthing position, and allowing women to walk around during labor. Facility includes curtains for maintaining privacy, waiting areas, and toilets for women and their families. Experience includes not sharing a bed with others, not sleeping or not delivering on the floor. A health facility is said to have an RMC index if all these three components are present.

RESULTS

The hospitals selected for the study purpose were assessed using a checklist. Table 1 shows that only seven hospitals had a feedback mechanism through which patients could give their suggestions or file a complaint. Six hospitals had a grievance cell. None of the hospitals displayed an RMC charter.

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Informational posters on costs as well as reporting of bribes Posters showing birth companion is allowed Posters showing birth position 1 (10) 9 (90) Posters displaying mother eating, drinking, walking during labor Tools such as chairs, mattress are available Tools such as balls, wall ladder 1 (10) 9 (90) Curtains/walls for privacy 10 (100) 0 Display of pre- and post-natal education posters/charts Emergency care (drugs, devices, equipments)/treatment triage and transport available Combined care for mother and child 9 (90) 1 (10) Sufficient space as per guidelines 8 (80) 2 (20)	Characteristics	n (%)	n (%)
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Display of RMC charter Informational posters on costs as well as reporting of bribes Posters showing birth companion is allowed Posters showing birth position Posters displaying mother eating, drinking, walking during labor Tools such as chairs, mattress are available Tools such as balls, wall ladder Curtains/walls for privacy Display of pre- and post-natal education posters/charts Emergency care (drugs, devices, equipments)/treatment triage and transport available Combined care for mother and child Sufficient space as per guidelines Any posters on infant formula Posters in local language on skin-to-skin contact, breastfeeding, their benefits, culturally appropriate Personalized consents for each condition in local language Safe childbirth checklist in labor room Surgical check list in operation theater Episiotomies and Cesarean audit 0 10 (100) 10 (100) 0 10 (100) 0 0 10 (100) 0 0 11 (10) 0 0 10 (100) 0 10 (100) 0 10 (100)	Complaint box		
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Episiotomies and Cesarean audit 10 (100) 0	Safe childbirth checklist in labor room	9 (90)	1 (10)
1	Surgical check list in operation theater	8 (80)	2 (20)
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	Posters on hand washing	9 (90)	1 (10)
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Table 2: Respectful maternity care index of health facilities.

	Facilities n(%)
RMC Index	
Yes	0
No	10 (100)
Policy	
Yes	0
No	10 (100)
Facility	
Yes	6 (60)
No	4 (40)
Experience	
Yes	8 (80)
No	2 (20)
RMC: Respectful maternity care	

Information on reporting bribes, poster was not displayed in any of the hospitals included in the study. Only one hospital had a poster on birth positions and a poster showing birth companions are allowed. Posters displaying mothers eating, drinking, and walking during labor were not there in any of the hospitals. Chairs, mattresses, curtains, and walls for privacy were there in all hospitals. Tools such as wall ladders and balls were only there in one hospital. Pre- and post-natal education posters and charts were displayed only in half of the hospitals. Emergency care or transport facilities were available at all hospitals. Combined care for mother and child was there in nine of the ten hospitals. Eight hospitals had space according to the guidelines. None of the hospitals displayed posters on infant formula. However, only six hospitals had posters in the local language on skin-to-skin contact, breastfeeding, and their benefits. All hospitals had consents in the local language. A safe childbirth checklist in the labor room was there in nine hospitals, and a surgical checklist in the operation theater was there in eight of the ten hospitals. An audit was conducted in all hospitals. A poster on handwashing was there in nine hospitals.

The RMC index^[3] comprising of the three components, including policy, facility, and experience in the various health facility is shown in Table 2. None of the selected facilities had the sub categories of policy. Only six health facilities provided curtains for maintaining privacy, waiting areas, and toilets for women and their families. Eight facilities had provision related to experience including not sharing bed with others and not sleeping or delivering on the floor.

Thus, none of the selected facilities met the criteria of having an RMC Index as one or more of the components were lacking in all facilities.

DISCUSSION

A study done in Ethiopia showed that 29.9% of hospitals and 27.8% of health centers met the criteria of an RMC index.[3] None of the facilities included in this study met the criteria of having an RMC index. To our knowledge, this is one of the few studies to assess the characteristics of health facilities and also assess the RMC Index in India. A limited number of facilities were selected for the study. Facilities from rural areas were not included. The government should work in this direction by providing funding, allocation of budgets, and setting standard norms and guidelines so that the facilities can provide RMC.

CONCLUSION

It is essential to improve the facilities provided by the hospitals to meet the criteria of having and delivering RMC services.

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Ethical approval

The research/study approved by the Institutional Review Board at Symbiosis International (Deeemed University), number SIU/IEC/168, dated August 27, 2020.

Declaration of patient consent

Patient's consent not required as there are no patients in this

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Conflicts of interest

There are no conflicts of interest.

Use of artificial intelligence (AI)-assisted technology for manuscript preparation

The authors confirm that there was no use of artificial intelligence (AI)-assisted technology for assisting in the writing or editing of the manuscript and no images were manipulated using AI.

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