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Continuity of care during childbirth: evidences and experiences

ABSTRACT

Continuity of care, emotional support and one-to-one midwife care are three aid approaches considered appropriate and recommended by the scientific literature due to the strong influence they have on the positive conclusion of both pregnancy and childbirth experiences such as: a minor use of epidural analgesia treatment, major frequency of spontaneous vaginal births, a reduction in operative vaginal births and Caesarean section, low index of dissatisfaction for the aid received.

OBJECTIVES. The main objectives of this task have been: outline clearly the principles of the listed aid approaches highlighting their importance and clinical consequences as well as their emotional connections, through an in-depth analysis of the scientific literature; and check the applicability and clinical effectiveness of continuity of care from the beginning of the labour to the end of the postpartum period, through a perspective study related to a specific environment.

CONCLUSIONS. The above-mentioned approaches should be granted in all maternity services as they are an index of aid safety and quality.

The study has evidenced that the continuity of care during all the childbirth period has been assured only in the 20% of cases and, where applied, the results tend to confirm the literature data.

PROPOSALS. Focusing the attention on the applicability of continuity of care and one-to-one midwife care these are the proposals:

- Common training processes for all the students of the Degree and Specializing University Courses who are in charge of childbirth assistance.
- Promotion of training processes based on effective experiences on the field.
- Reorganization of the aid services based on continuous processes provided with the most suitable tools.
- Reorganization of services reducing fragmentation and promoting job flexibility models.
- Analysis of professional midwives' work load.