

Impact of Husbands' Involvement in the Antenatal Care of Their Wives in Tertiary Health Institutions in Rivers State

Rose Obele Olunwa

African Centre of Excellence for Public Health and Toxicological Research,
Midwifery Division, University of Port Harcourt
roseolunwa@gmail.com

Patricia C Ukaigwe (Ph.D)

Department of Nursing Science,
University of Port Harcourt, Rivers State, Nigeria
ukaigwe@uniport.edu.ng
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Abstract

This study investigated the impact of husbands' involvement in the ante-natal health care of their pregnant wives attending clinic in tertiary health institutions in Rivers State. This study adopted the descriptive survey design with an estimated population of 1,500 husbands of pregnant women attending antenatal clinic in tertiary health institutions. A sample size of 209 was selected using the purposive sampling method. The instrument for data collection was a structured questionnaire, and data were analyzed using percentage, mean, standard deviation and z-test at 0.05 level of significance. The result of the study showed that, the extent to which husbands were involved in the antenatal healthcare of their pregnant wives was high. The ways husbands were involved included: accompanying wife to the clinic, providing financial support for her antenatal care, been acquainted with the antenatal schedule, showing interest in discussing antenatal healthcare services and making beneficial contributions when discussing antenatal health care with wife. The result also showed that husbands' involvement had a high impact on the antenatal health care of their pregnant wives. The impacts included the following: it gives encouragement to the wives to use the available services more adequately, women utilize the antenatal care services better, wives keeping to their antenatal schedule, better understanding of the healthcare needs of pregnant wives, and promotion of mutual responsibility to the unborn baby. The study recommended that, health care workers should encourage fathers to be involved in maternity care by showing a preferential treatment to them.

Keywords: *Antenatal, Husbands, Impact, Involvement, Pregnant.*

Introduction

Involvement of husbands in the antenatal health care of their pregnant wives is imperative to achieve better infant and maternal health outcomes. Husband's involvement in antenatal care is defined as the husband accompanying his wife or female partner to Antenatal Care (ANC), providing social, economic support and ensuring that all recommendations made at ANC are observed to safeguard the wellbeing of the couple and the baby (Muloongo, Sitali, Zulu, Hazemba & Nweemba, 2019). Male involvement in reproductive health including antenatal care requires men to play a more responsible role towards women's health, to make them more supportive of women using health care services and sharing child-bearing activities and this leads to better understanding between husband and wife, it reduces maternal and child mortality in connection with pregnancy and labor by being prepared in obstetric emergencies (Drennan cited in Gathuto, 2014).

Failure to incorporate men in maternal health promotion, prevention and care programs by policy makers, programme planners and implementers of maternal health services has had a serious impact on the health of women (Greene, 2002). The World Health Organization (2015) statistics showed that, globally, husband's presence in antenatal care and during delivery remains a challenge to safe motherhood and that ninety-nine percent (99%) of all maternal deaths occurs in low and middle-income countries of which almost half of these occur in sub-Saharan Africa including Nigeria. In the same way, Tweheyo (2010) reported that, each year 210 million women become pregnant, 15% of these develop complications and over half a million die due to reasons related to pregnancy or birth. Thus, husband's involvement in the antenatal care of their wives is important to enable the wife cope adequately during the gestational period.

In a patriarchal society like Nigeria where the husbands are the key decision makers including the choice of facility and health care services utilization for the woman, they should be fully involved in the antenatal care of their wives, instead of tagging it as 'women affair'. The foregoing could be concretized by the assertion of Aborigo, Reidpathm and Oduro (2018) that, the notion of joining one's wife at the antenatal clinic is unusual in many communities and the husband's presence is often considered unessential. Though literature has shown that, in recent time, sexual and reproductive healthcare has moved from the age-old tradition of being woman-centric to being couple-centric (Suandi, Williams & Bhattacharya, 2020). Yet, in our society, only women are seen attending to their antenatal care needs, certainly, some factors would be barriers to their involvement which this study aimed to find out.

Pregnancy itself is not an illness but, it is a known fact that pregnancy is accompanied by some emotional, and physical demands which in most cases challenges the health and wellbeing of the woman. These often are observed in form of tiredness, dizziness, discomfort, pains, loss of appetite and taste, loss of sense of smell, nausea, irritations and frequent fever among others. In such times, the husband who is directly involved as a partner, need to understand this and render support to his pregnant wife as often as needed including the antenatal care of the woman. However, this has not been the case for some men as shown from personal observation by the researcher. Observation has shown that often times, pregnant women are left alone to attend to their antenatal care without the involvement of their husbands who perhaps felt reproductive issue is a 'woman affair'.

Several factors could be implicated for the lack of involvement of husbands in the ante natal care of their wives; lack of awareness about the demands of pregnancy on the part of the husband could possibly result to the involvement of husbands. Identified barriers to male involvement in the ANC of their wives may include: health services factors (waiting time, attitude of the healthcare providers, facility type and space constraints at the ANC clinic, and dominance of the antenatal clinic by female forks); socio-cultural factors (marital status, cultural beliefs, age, educational exposure, etc) and economic factors such as financial constraints and job type. The role of husbands in ensuring a positive pregnancy outcome cannot be overemphasized. Husbands, particularly in African countries, play a pivotal role in decision-making within a home, and are often the breadwinners thus, their involvement in the antenatal care of their pregnant wives possibly help the woman survive all the discomforts and pains created by the pregnancy. Thus, researching on the barriers to husbands' involvement in the antenatal care of women will aid, give direction and focus to programmes and interventions aimed at promoting/improving the participation and support of husbands in the utilization of reproductive health service. Hence, this study was aimed at investigating the impact of husbands' involvement in the ante-natal health care of their pregnant wives attending clinic in tertiary health institutions in Rivers State.

Objectives

The objectives of this study includes to:

1. determine the extent to which husbands are involved in the antenatal healthcare of their pregnant wives
2. find out the impact of husband's involvement in the antenatal healthcare of their pregnant wives
3. determine the factors that can promote husbands' involvement in the antenatal care of their pregnant wives.

Research Questions

The following research questions will be answered in this study

1. What is the extent of husbands' involvement in the antenatal healthcare of their pregnant wives attending antenatal clinic in the tertiary institutions in Rivers State?
2. What is the impact of husband's involvement in the antenatal healthcare of their pregnant wives?
3. What are the factors that can promote husbands' involvement in the antenatal care of their pregnant wives?

Methodology

This study adopted the descriptive cross-sectional survey design with a population which consisted of consist of the husbands of all the pregnant women attending antenatal clinic in the tertiary Hospital in Rivers State as at the time of the study. The population was estimated to be 1,500 husbands of pregnant women attending antenatal clinic in the University of Port Harcourt Teaching Hospital and Rivers State University Teaching Hospital. A sample size of 209 was determined for this study using Cochran's Formula for estimation of sample. The sampling method used in this study was the purposive sampling method, which was used to select the husbands of antenatal mothers who met the inclusion criterion and the purpose of the study. Data was collected using a structured questionnaire. Data collected were sorted to ensure its completeness and then enter into the latest version of the Statistical Product for Service Solution (SPSS) which was used for the

statistical analysis of the data collected. Socio-demographic data and research questions were analyzed using percentage, frequency, mean and standard deviation. For the items on the four point Likert Scale, the criterion mean of 2.50 was used as the yardstick for interpretation of the results gotten as follows: $1+2+3+4 = 10 / 2 = 2.5$. The results of the study are shown below

Results

Table 1: extent of husbands' involvement in the antenatal healthcare of their pregnant wives

| SN | Items | Mean | Stand. Dev. |
|---------------------------------|--|-------------|-------------|
| 1 | Accompanies wife to the clinic for her antenatal health care services | 2.97 | .14 |
| 2 | Provide financial support for wife's antenatal care | 3.39 | .66 |
| 3 | Acquainted with wife's antenatal clinic schedule | 2.98 | .12 |
| 4 | Ensure all recommendations made at the ANC are observed by wife by assisting her in any way she needs to be assisted | 2.84 | .53 |
| 5 | Shows interest in discussing antenatal health care services with wife | 2.86 | .42 |
| 6 | Makes beneficial contributions when discussing antenatal health care with wife | 2.73 | .67 |
| Grand mean/Std deviation | | 2.96 | 0.42 |

Criterion mean = 2.50

The result of the study in table 1 showed that the extent to which husbands were involved in the antenatal healthcare of their pregnant wives was high as the grand mean of 2.96 ± 0.42 was greater than the criterion mean of 2.50. The ways husbands were involved included: accompanying wife to the clinic, providing financial support for her antenatal care, been acquainted with the antenatal schedule, showing interest in discussing antenatal healthcare services and making beneficial contributions when discussing antenatal health care with wife.

Table 2: Impact of husband's involvement in the antenatal healthcare of their pregnant wives

| SN | Items | Mean | Stand. Dev. |
|----|---|------|-------------|
| 1 | When husbands are involved in the antenatal care, it gives encouragement to the wives to use the available services more adequately | 2.61 | .54 |
| 2 | Women whose husbands are supportive will utilize the antenatal care services better | 3.65 | .77 |
| 3 | Husbands who are involved in the ANC services of their wives always ensure that their wives keep to their schedule | 3.65 | .77 |
| 4 | Participation of husbands in antenatal care leads to better understanding of the healthcare needs of their pregnant wives | 3.71 | .62 |

| | | | |
|---|---|-------------|-------------|
| 5 | Husband's participation in his wife's antenatal promotes mutual responsibility to the unborn baby | 3.80 | .39 |
| | Grand mean | 3.48 | 0.62 |

Criterion mean = 2.50

The result of the study in table 2 showed that impact of husbands' involvement in the antenatal health care of their pregnant wives. The result showed that husbands' involvement had a high impact on the antenatal health care of their pregnant wives as the grand mean of 3.48 ± 0.62 was greater than the criterion mean of 2.50. The impacts included the following: it gives encouragement to the wives to use the available services more adequately, women utilize the antenatal care services better, wives keeping to their antenatal schedule, better understanding of the healthcare needs of pregnant wives, and promotion of mutual responsibility to the unborn baby.

Table 3: Factors that can promote husband's involvement in the antenatal care of their pregnant wives

| SN | Items | Mean | Stand. Dev. |
|----|---|-------------|-------------|
| 1 | Providing special sections for husbands in the ANC care clinic will promote husbands' involvement | 2.80 | .39 |
| 2 | Providing men with adequate information about antenatal care through different media | 3.00 | .00 |
| 3 | Giving special or dignified treatment to husbands who accompany their wives to the ANC clinic | 2.75 | .53 |
| 4 | Husbands will be fully involved in the ANC of their wives if the ANC clinics are male-friendly | 2.13 | .46 |
| 5 | Making it compulsory for pregnant women to be registered alongside with their husbands will enhance husbands' involvement in the antenatal care of their pregnant wives | 2.92 | 1.04 |
| | Grand mean | 2.72 | 0.48 |

Criterion mean = 2.50

The result of the study in table 3 showed that certain factors could promote husbands' involvement in the antenatal health care of their pregnant wives as the grand mean of 2.72 ± 0.48 was greater than the criterion mean of 2.50. The factors included: providing special sections for husbands in the ANC care clinic, providing men with adequate information about antenatal care through different media, giving special or dignified treatment to husbands who accompany their wives to the ANC clinic, and making ANC to be male-friendly.

Discussion of Findings

The result of the study in table 1 showed that the extent to which husbands were involved in the antenatal healthcare of their pregnant wives was high as the grand mean of 2.96 ± 0.42 was greater than the criterion mean of 2.50. The ways husbands were involved included: accompanying wife to the clinic, providing financial support for her antenatal care, been acquainted with the antenatal schedule, showing interest in discussing antenatal healthcare services and making beneficial contributions when discussing antenatal health care with wife. The finding of this study is similar to that of Falade-Fatila and Adebayo (2020) whose study in Ibadan also showed a high extent of husbands' involvement in the antenatal care of their pregnant wives. The finding of this study is also in agreement with that of Annoon (2020) which showed that majority of the husbands were highly involved in the antenatal care of their wives. The finding of this study is also in line with that of Kumbeni et al. (2019) whose study carried out in Ghana which also showed a high extent of the husbands' involvement in the antenatal care of their wives. The finding of this study also corroborates other studies which showed high extent of husbands' involvement in the antenatal care of their pregnant wives (Sharma et al., 2018; Ongolly & Bukach, 2019; Kabanga et al., 2019; Gibore et al., 2019). The similarity found between the previous studies and the present one might be due to the homogeneity of the study populations.

The result of the study in table 2 showed that husbands' involvement had a high impact on the antenatal health care of their pregnant wives as the grand mean of 3.48 ± 0.62 was greater than the criterion mean of 2.50. The impacts included the following: it gives encouragement to the wives to use the available services more adequately, women utilize the antenatal care services better, wives keeping to their antenatal schedule, better understanding of the healthcare needs of pregnant wives, and promotion of mutual responsibility to the unborn baby. The finding of this study is in line with that of Wai et al. (2015) showed that pregnant women whose husbands were involved in their antenatal care were more likely to have attended antenatal care clinics more than those whose husbands were not involved. However, the findings of this study differs from that of Mullany et al. (2007) whose study on the impact of husbands' involvement in antenatal services carried out in Nepal showed that there was no significant impact of husbands' involvement on the antenatal care of their pregnant wives. The findings of this study is also at variance with that of Forbes et al. (2018) which showed that there was no significant impact of husbands' involvement in the antenatal care of their wives. The difference in the study locations might be implicated for the variations found between the studies.

The result of the study in table 3 showed that certain factors could promote husbands' involvement in the antenatal health care of their pregnant wives as the grand mean of 2.72 ± 0.48 was greater than the criterion mean of 2.50. The factors included: providing special sections for husbands in the ANC care clinic, providing men with adequate information about antenatal care through different media, giving special or dignified treatment to husbands who accompany their wives to the ANC clinic, and making ANC to be male-friendly. The finding of this study corroborates that of Sharma et al. (2018) which showed that one of the factors that could promote husbands' involvement in the antenatal care of their wives is awareness. The finding of this study is in consonance with that of Ongeso and Okoth (2018) which showed that, majority of the respondents stated that the members of staff at ANC clinic are friendly and approachable and this can promote men's involvement in the antenatal care of their pregnant wives.

Conclusion

Based on the findings of the study, it was concluded that, involving fathers in the antenatal care of their pregnant wives is very crucial to ensuring better maternal health outcomes as it gives encouragement to the wives to use the available services more adequately, women utilize the antenatal care services better, wives keeping to their antenatal schedule, better understanding of the healthcare needs of pregnant wives, and promotion of mutual responsibility to the unborn baby.

Recommendations

The following recommendations were put forward based on the findings of the study:

1. Women should play their role of ensuring the involvement of their husbands in their antenatal care by constantly reminding the husbands of their role in maternity care, this could motivate them to be involved.
2. The health care workers should make antenatal care male-friendly to encourage husbands' involvement in the antenatal care of their pregnant wives.
3. The government or other employers of labour should permit husbands who may take excuse to accompany their pregnant wives to the antenatal clinics.

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