Desire of Women during Intrapartum Care

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Pregnancy and birth are unique processes for women. Women and families hold different desire during intrapartum care based on their knowledge, experiences, beliefs culture, social family backgrounds. These differences should be understood and respected care is adapted and organized to meet the individualized desire of women and families. According to Royal College of Obstetrician and Gynaecologists (RCOG) "Birth is a life changing event and the care given to women has the potential to affect them both physically and emotionally in the short and longer term". The overall objective of taking care of women during childbirth is creating a positive experience for a woman and her family while preserving their physical and psychological health, preventing of morbidity and reaction to the emergency situations. The maternal desire during labor play an important role in specified woman's response to her childbirth experience. Every woman giving birth has expectations. Identifying women's desire, wishes, needs and fears empower the health care providers to achieve a common goal for a positive birth experience. Every year, more than 2.9 million women give birth in Bangladesh of them 54% of them receive maternity care in the hospital and 59% were delivery through trained skilled midwives. Despite many modifications in the Bangladeshi health care system in the recent decades, there is still more scope to enhance in the quality of maternity care. "Evidence-Based Practice (EBP)" is simply the integration of the best available researchbased clinical evidence, clinical expertise and patient needs, values and preferences to develop a system of quality care." Although EBP detected as necessary for quality care in developed countries, it is often based on research and clinical evidence, less attention has been paid to the needs and preferences of the parturient women. There is often a gap between what women

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In conclusion it is indicated that there is a need to encourge health care professionals and Bangladeshi women for increased knowledge about obstetric care. This should be based on the desire of women in their care. If midwives to explore and discover the expectation and desire of women regarding care, sensible expectations can be encouraged. Hopefully, complied, this issue could lead to women's empowerment for normal vaginal delivery.

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