

# Interventions during the second stage of labour: an exploration of what may affect their use in Jeddah, Saudi Arabia

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This thesis is an exploratory qualitative study using an ethnographic approach to explore the use of interventions during the second stage of labour among healthcare professionals and what may be influencing their use within two large government hospitals in Jeddah, Saudi Arabia.

Data collection methods included participant observations of 19 labours and births and semi-structured interviews with 29 healthcare professionals comprising obstetricians [n=10], midwives [n=12], nurses [n=6] and nurse-midwife [n=1]. In addition, the hospital labour and delivery ward policies and guidelines from those hospitals were collected. Data collection took place over a two-month period in 2011 at King's Hospital, and a two month period in 2012 at City Hospital (pseudonyms), after seeking ethical approval from City University and from each of the hospitals involved in the study. All participant observations, interviews, field notes (diary), and hospital documentation was recorded using a word processing package (Word 2010) and then transferred into qualitative data analysis software (QDAS) (Atlas.ti 7) which was used for organising and coding interviews transcripts, observations field notes and hospital policy documents.

The findings from this PhD confirm that the influences on use of interventions during childbirth are complex. The findings revealed a number of rationalisations that professionals give for the many interventions used during labour and birth. Primary interventions used routinely included continuous Electronic Foetal Monitoring (EFM), bladder catheterisation, intravenous infusion, denial of companionship, episiotomy practice, lithotomy position, limitations on mobility and on duration of second stage of labour, directed pushing. Rates of instrumental delivery and Caesarean section were increasing.

Thematic analysis of the data identified two core and inter-related explanatory themes in relation to the use of interventions observed during the second stage of labour in Jeddah: ways of seeing childbirth and power. The findings demonstrate the influence of a hierarchical system of control, the impact of the medical model, and the role of power in medical surveillance and fear culture on the use of interventions during the second stage of labour.

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We found that Saudi Arabia's young adults lead varied lives. Still, the story of one 24-year-old man helps illustrate the plight of his age cohort: This young man, unemployed and single, lives with his family in Jeddah. He told us that he spends his days sleeping, chatting with friends online, and playing or watching soccer matches. He lacks connections that might help him get a job, he says, citing the prevalence of nepotism in hiring. During the focus group discussions, participants noted that the country's northern, eastern, and central regions have enjoyed continuous development, which promotes both better opportunities and greater life satisfaction. In contrast, the south and west have lagged behind. Such an approach is already being used in the United Arab Emirates. International reactions to the Saudi-led intervention in Yemen of 2015 were mixed. Most other Arab League nations and several Western governments backed the Saudi Arabia-led military coalition, but other governments warned against an escalation in the violent situation in Yemen. Arab League – Delegates to the Arab League voted to study the formation of a joint military force on 29 March 2015, days after the intervention in Yemen began. Secretary-General Naril Elaraby affirmed that the intervention Arabic is the official language of Saudi Arabia, but English is widely spoken. It is used in business and is a compulsory second language in schools. Among the non-Saudi population, many people speak Urdu, the official language of Pakistan and other Asian languages such as Farsi and Turkish. Arabic is spoken by almost 200 million people in more than 22 countries. It is the language of the Qur'an, the Holy Book of Islam, and of Arab poetry and literature. During the holy month of Ramadan all Muslims must fast from dawn to dusk and are only permitted to work six hours per day. Fasting includes no eating, drinking, cigarette smoking, or gum chewing. Expatriates are not required to fast; however, they must not eat, drink, smoke, or chew gum in public.