

Barriers to Implement Evidence-Based Practice in Intrapartum Care: An Exploratory Descriptive Qualitative Study

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Evidence-based practice (EBP) is an effective approach to improve the quality of intrapartum care. Exploring the barriers to implement evidence-based intrapartum care is crucial to deliver high quality care to parturient women. The current study aimed to explore barriers to adopt evidence-based intrapartum care from the perspective of obstetric care providers. This exploratory descriptive qualitative research was conducted at the delivery room of Teaching Hospital, Peradeniya, Sri Lanka. Seventeen participants were selected from midwives, nurse-midwives, nurse managers and doctors, using purposive sampling technique. Data were collected through face-to-face, semi-structured, in-depth interviews and analysed using thematic analysis. Data analysis identified three major themes and thirteen subthemes. Major themes included barriers related to care providers, organizational environment, and labouring women. The sub-themes emerged were lack of human resources, poor attitudes of care providers, poor relationship among care providers, poor relationship between mother and care providers, lack of care providers' knowledge about EBP in childbirth care, gaps in administration, high workload, lack of physical resources, lack of training, lack of use/availability of guidelines, drawbacks in implementation of intrapartum practices, lack of maternal knowledge on childbirth and labour room procedures and lack of maternal support during labour and childbirth. The current study identified a number of contemporary barriers for the implementation of evidence-based intrapartum care from viewpoints of maternity health professionals. However, the adoption of evidencebased intrapartum care is a complex process. Therefore, effective strategies should be determined through a participatory approach to encourage the care providers' acquiescent adoption of evidence-based intrapartum care.

Keywords: barriers, evidence-based practice, intrapartumcare, quality of care