The Knowledge and Attitudes of Health Professionals Working in Mother-Friendly Hospitals About Complementary Therapy and Supportive Care Methods

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Research

Keywords: Mother friendly hospital, Complementary, Supportive, Healthcare professionals, Attitude

Posted Date: December 30th, 2020

DOI: <https://doi.org/10.21203/rs.3.rs-136207/v1>

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Version of Record: A version of this preprint was published at European Journal of Midwifery on April 13th, 2022. See the published version at <https://doi.org/10.18332/ejm/146166>.

Abstract

Background: It is important that the healthcare professionals who are with the mother at the moment of birth and afterwards know and apply effective complementary treatment and supportive care methods, their effects and limitations. The aim of this study is to determine the knowledge levels and attitudes of health personnel about complementary therapy and supportive care methods to be used in the management of labor pain and postpartum period.

Methods: A descriptive study included 142 midwives / nurses and physicians working in the delivery room and maternity services of mother-friendly hospitals in Manisa. The questionnaire form consisting of 25 questions evaluated the knowledge and attitudes of the participants about complementary therapy and supportive care methods.

Results: It was found that 30.6% of the healthcare professionals participating in the study used complementary treatment and supportive care methods in their patients. The least heard method was chiropractic (81.0%), the best known method was hydrotherapy (water birth) (5.8%). The most used method is massage with a rate of 14.0%. It was determined that the mean total attitude score of the healthcare workers on complementary treatment and supportive care methods was 18.57 ± 5.12 (min: 8, max: 40). A statistically significant difference was found between the education level and the institution they work for of healthcare professionals and their attitude scores ($p < 0.05$).

Conclusions: 1 out of every two healthcare professionals did not have information about complementary treatment and supportive care methods. It can be said that the use of these methods will increase with the learning desire and positive attitude of healthcare professionals.

Introduction

Pregnancy and childbirth are a normal, healthy and natural function of the body, which is accepted as a normal process in most societies, it is one of the best life experiences for parents [1]. However, negative experiences and stories about childbirth have caused birth to be remembered with pain and fear in society. Factors such as birth interventions performed in hospitals when not necessary, and inappropriate delivery room conditions have driven women away from natural birth and led to cesarean delivery [2]. The proliferation of unnecessary interventions in the natural birth has mobilized the Coalition for Improving Maternity Services (CIMS), which works for the care and welfare of mothers, babies and families [3].

The concept of mother-friendly birth was developed by CIMS in 1996, and it means a natural and healthier birth practice and care for mother and baby [4]. The purpose of care in the mother-friendly birth model is to support the development of maternal and child health with evidence-based practices [5–6]. For this purpose, principles that increase, protect and support mother-friendly birth services and mother-friendly practices in ten steps have been established. In order for birth centers, maternity clinics and hospitals to receive the title of "Mother Friendly Hospital", it is necessary to constantly apply the principles of CIMS and mother-friendly care in ten steps. Since the relevant criteria are included in the publications

on mother-friendly hospitals, this publication will not mention mother-friendly practices in ten steps and the principle [2, 4].

The transition to mother-friendly practices in our country has been within the scope of the Health Transformation Program. In the renovated hospitals, birth opportunity was provided in single rooms. However, besides the quantitative improvements provided in the health services provided to the mother, there was a need to improve the quality of the services [7]. Manisa has been chosen as the first pilot province in our country for the mother-friendly hospital application. Three public hospitals in Manisa (Manisa Merkezefendi State Hospital, Akhisar Mustafa Kirazoğlu State Hospital and Turgutlu State Hospital) were evaluated and received the title of "first mother-friendly hospital" on 17.04.2015. Today, a total of 77 hospitals have mother-friendly titles [8].

With mother-friendly practices, unnecessary interventions to birth in our country have been prevented in recent years. The common point reached today is to ensure that the birth is managed in the least possible attempt and the healthiest way possible. Existing evidence suggests that midwives may consider complementary therapies compatible with the woman-centered midwifery philosophy [9]. In this process, depending on the criteria of the mother-friendly hospital, the mother's wishes were listened to, and she was directed to decide on the method of delivery as she wishes. More attention was taken care to the privacy of the mother, and routine practices that were not based on evidence were abolished. It provided the opportunity to walk and move comfortably in the room, which was proven to relieve the birth pain [2]. It also advocated the need for complementary therapy and supportive care for labor pain.

In today's age of science and technology, besides many changes in health, supportive care has become increasingly important and supportive care practices have increased in all areas of health [10]. These methods, which are also used in the control of birth pain, generally consist of four different techniques. These; relaxation, mental stimulation, tactile stimulation and breathing techniques. Within the scope of these techniques, there are various methods such as massage, therapy, hand foot massage, phytotherapy, acupressure, aromatherapy, acupuncture, hot-cold application, moving, yoga, hypnotherapy and changing positions [11]. It is important for the healthcare professionals, who are with the mother at birth, to know these methods, their effects, limitations and to apply them effectively in controlling labor pain. When the literature was examined, it was found that there were studies showing that healthcare personnel did not have enough information about complementary therapy and supportive care [12–15]. According to the results of the study, there is a lack of knowledge about knowing and applying the methods. Therefore, undergraduate and in-service training of midwives who are supportive of the mother at birth has gained importance. Before the education, which is the second phase of the project, it has been considered that it is necessary to determine the status of the information gap in the first phase.

This study was conducted to determine the knowledge levels and attitudes of healthcare professionals about complementary therapy and supportive care methods to be used in the management of labor pain and postpartum period.

Methods

The research was applied in in the city of Manisa, Turkey. Manisa is an industrial city in western Turkey and 49.6% of the population of it is women. Switch to mother-friendly practices in Turkey, began Manisa with the election as the first pilot province. This research was conducted between August 2018 and April 2019 in five public hospitals, one in the center and four in different districts, which received the title of Mother Friendly Hospital in Manisa. In this study, the descriptive data of the first phase of the project named "The Effect of Supportive Care Methods Training Provided to Health Personnel Working in Mother Friendly Hospitals on the Knowledge Levels and Attitudes of Health Personnel" supported by Manisa Celal Bayar University Scientific Research Projects is shared.

The population of the study consisted of midwives / nurses and doctors working in the delivery rooms and maternity service of the relevant hospitals (N = 142). The population could not be expanded further, as the study was conducted in hospitals that were named mother-friendly hospitals. It was aimed to reach the population without using the sample selection method. During the data collection process, midwives / nurses and doctors who left their jobs, were on annual leave, and did not agree to participate in the study were excluded and the study was completed with 121 healthcare professionals (participation rate 85.2%).

This study was conducted according to the Declaration of Helsinki. Participants were informed about the research objectives and procedure, and their verbal and written consents were obtained. Institutions were visited by the researchers, and healthcare professionals were given questionnaires evaluating their knowledge and attitudes about complementary therapy and supportive care methods. After completing the questionnaire it was collected back. A questionnaire consisting of 25 questions was used to collect data. The first 17 items of the questionnaire were prepared by the researchers in line with the literature. The Attitude Scale towards Complementary and Alternative Medicine, developed by Araz and Harlak [16] in 2006, constituted the last 8-item part of the questionnaire. The cronbach-alpha value of the scale is 0.82. For this study it was calculated as 0.82.

The data obtained were evaluated in the SPSS. In evaluating the data; Percentage, mean, median, Kruskal Wallis test and Mann Whitney U test and Wilcoxon statistical analysis were used. $p < 0.05$ was considered statistically significant.

Results

The average age of the healthcare professionals participating in the study was found to be 39.95 ± 6.43 (Min: 23 Max: 60). It was determined that 88.4% of the participants were women, 90.1% were married, and 51.2% were university graduate. Considering their professional characteristics, it was seen that 14.0% were physicians, 74.4% were midwives and 11.6% were nurses. The average working time of the healthcare professionals included in the study was 17.84 ± 7.78 (min: 1 max: 40), and the average working time in the maternity service or delivery room was 9.99 ± 7.70 (min: 1 max: 30) found (Table 1).

Table 1. Some descriptive and professional characteristics of healthcare professionals

Descriptive and professional characteristics		N	%
Age Ort±Sd:39.95±6.43 Min:23 Max:60	30 ↓	10	8.3
	31-40	59	48.8
	41-50	44	36.4
	51 ↑	8	6.6
Gender	Woman	107	88.4
	Male	14	11.6
Marital status	Married	109	90.1
	Single	12	9.9
Education status	High School	18	14.9
	Associate Degree	19	15.7
	University	62	51.2
	Master Degree	22	18.2
Profession	Physician	17	14.0
	Midwife	90	74.4
	Nurse	14	11.6
Institution	Merkez Efendi State Hospital	43	35.5
	Akhisar Mustafa Kirazoğlu State Hospital	19	15.7
	Turgutlu State Hospital	26	21.5
	Alaşehir State Hospital	17	14.0
	Soma State Hospital	16	13.2
Working time in the profession (year) Ort±Sd:17,84±7,78 Min:1 Max:40	1-10 year	25	20.7
	11-20 year	49	40.5
	21-30 year	44	36.4
	31-40 year	3	2.5
Working time in the maternity service and delivery room (year) Ort±Sd:9,99±7,70 Min:1 Max:30	1-10 year	71	58.7
	11-20 year	40	33.1
	21-30 year	10	8.3
Total		121	100.0

It was found that 77.7% of the healthcare professionals had previously participated in in-service training on labor pain and postpartum care methods. It was found that 89.3% of them attended less than 4 in-service training. It was determined that 49.6% of the healthcare professionals participating in the in-service training received information on the positive and negative effects of complementary treatment and supportive care methods on labor (Table 2).

Table 2

Healthcare professionals' participation in in-service training on labor pain and postpartum care in the last 3 years

Characteristic		N	%
Participation in in-service training	Yes	94	77.7
	No	27	22.3
Number of attending in-service training *	4 and below	67	89.3
	5 and above	8	10.7
Ort $\pm$ Sd: 2.36 ± 1.47 Min:1 Max:8			
Information received in in-service training** (n:94)	Physiology of labor pain	72	59.5
	Pain theories	54	44.6
	Assessment of labor pain	69	57.0
	Factors causing pain at birth	67	55.4
	The effect of pain on labor	69	57.0
	The importance of labor pain control	75	62.0
	Positive and negative effects of pharmacological methods on labor	59	48.8
	Positive and negative effects of complementary treatment and supportive care methods on labor	60	49.6
	The role of the midwife/nurse in the management of labor	75	62.0
	Mother-baby attachment	72	59.5
	Breastfeeding	83	68.6
	Other	20	16.5

*73 people answered.

**More than one option has been marked.

90.9% of the healthcare professionals think that complementary therapy and supportive care methods provide pain control and facilitate labor. 30.6% of the participants stated that they used the relevant methods. 88.4% of the participants stated that they would like to receive training on complementary therapy and supportive care methods (Table 3).

Table 3
Healthcare professionals' opinions about complementary therapy and
supportive care methods and their willingness to receive training

Characteristic		N	%
Ideas about pain control and facilitation of labor	Yes	110	90.9
	No	11	9.1
Use of related methods	Yes	37	30.6
	No	84	69.4
Willingness to receive education	Yes	107	88.4
	No	10	8.3
	No idea	4	3.3

Findings about the knowledge and opinions of the healthcare professionals about complementary treatment and supportive care methods are given in Table 4. Accordingly, chiropractic was found to be the unheard of method with 81.0%, and acupuncture was the most commonly heard method with a rate of 53.7%. It was determined that the best known method in all aspects was hydrotherapy (water birth) with a rate of 5.8%, and the most used method was massage with a rate of 14.0%.

Table 4
Healthcare professionals' knowledge and opinions on complementary therapy and supportive care methods

Complementary Therapy and Supportive Care Methods	Knowledge and opinion											
	I've never heard of		I heard		I have limited information		I have enough information		I know the method in every way		I use it for my patients	
	n	%	n	%	n	%	n	%	n	%	n	%
Acupuncture	15	12.4	65	53.7	32	26.4	9	7.4	0	0.0	0	0.0
Aromatherapy	56	46.3	37	30.6	17	14.0	9	7.4	1	0.8	1	0.8
Reflexology	65	53.7	33	27.3	14	11.6	8	6.6	1	0.8	0	0.0
Phytotherapy,	59	48.8	38	31.4	19	15.7	5	4.1	0	0.0	0	0.0
Therapeutic Touch	58	47.9	32	26.4	20	16.5	8	6.6	2	1.7	1	0.8
Music	18	14.9	57	47.1	23	19.0	20	16.5	3	2.5	0	0.0
Acupressure	93	76.9	12	9.9	9	7.4	4	3.3	3	2.5	0	0.0
Homeopathy	86	71.1	12	9.9	15	12.4	7	5.8	1	0.8	0	0.0
Hipnoterapi	56	46.3	27	22.3	24	19.8	13	10.7	1	0.8	0	0.0
Chiropractic	98	81.0	8	6.6	9	7.4	6	5.0	0	0.0	0	0.0
Yoga	14	11.6	56	46.3	29	24.0	18	14.9	2	1.7	2	1.7
Positioning	13	10.7	36	29.8	24	19.8	29	24.0	4	3.3	15	12.4
Massage	5	4.1	31	25.6	29	24.0	33	27.3	6	5.0	17	14.0
Hydrotherapy (Water birth)	9	7.4	50	41.3	26	21.5	22	18.2	7	5.8	7	5.8
Hot-Cold Application	8	6.6	45	37.2	21	17.4	30	24.8	2	1.7	15	12.4

It was determined that the mean total attitude score of the healthcare professionals on complementary therapy and supportive care methods was 18.57 ± 5.12 (min: 8, max: 40).

The relationship between the descriptive and professional characteristics of the healthcare professionals and their total attitude scores was examined. There was no statistically significant difference between the independent variables of age, gender, marital status, profession, working time in the profession, working time in the maternity service and delivery room and attitude scores ($p > 0.05$). A statistically significant difference was found between the independent variables of education, the institution and their attitude scores ($p < 0.05$).

The relationship between the healthcare professionals knowledge and use of complementary therapy and supportive care methods and their total attitude scores were examined. A statistically significant difference was found between the independent variable of provide pain control and facilitate delivery of the related methods and attitude scores ($p < 0.05$). There was no statistically significant difference between the attitude scores and the number of information about the relevant subject, the willingness to receive education and the use of methods ($p > 0.05$).

Discussion

It is seen that complementary health approaches are mostly used in conjunction with existing medical treatment to manage symptoms, reduce the side effects of drugs, and strengthen the immune system. Particularly because women generally attach more importance to their own health care and treatment in case of illness, the rate of using complementary applications is high [17]. At the same time, the usefulness of complementary therapy and supportive care applications for women's health has been proven by numerous studies [18–23]. As a result of these studies is stated that it can increase fertility [18], reduce the perception of pain at labor [19, 20], prevent the formation of postpartum breast disorders [21], Improve mood disorders in women receiving infertility treatment [22], have mitigating effects on problems present during menopause [23]. The use of complementary treatment and supportive care practices, which are beneficial in all stages of women's life, by health service providers should be widespread and supported.

The naturally progressing labor and labor process appears to be a very feared and badly remembered experience, where the pregnant woman does not take part in her own labor with the developing technology, excessive medical intervention takes place [24]. Healthcare professionals have a lot of responsibility to break this taboo. It is important to have sufficient knowledge about labor pain and postnatal care methods and to develop a positive attitude about complementary and supportive care methods. Lafçı and Kaşıkçı [15] in their study in our country; healthcare professionals knowledge and use of complementary and alternative therapies methods. As a result of the study, it was stated that the rate of healthcare professionals who took any course or training on related methods was only 4.8%. In this study, the rate of getting information about labor pain and postpartum care methods was found to be 77.7%, while only half of them (49.6%) were informed about complementary therapy and supportive care methods (Table 2). Since the hospitals where the study was conducted are mother-friendly hospitals, it can be said that the knowledge and attitudes of healthcare professionals have increased positively thanks to the in-service training given about the related methods. However, it was still observed that one of the two healthcare personnel did not have information about complementary therapy and supportive care methods.

Complementary therapy and supportive care methods are widely used at childbirth all over the world [9]. Such as acupuncture, acupressure, aromatherapy, homeopathy, phytotherapy, ozone therapy, oxygen therapy, mesotherapy, massage, hypnotherapy, ayurveda, therapeutic touch, yoga, cryotherapy, meditation, osteopathy, reflexology, spa therapy, thermal therapy, hydrotherapy, music therapy,

positioning, hot-cold application [25]. Although there are many methods, very few of them are known by healthcare professionals [13–15]. In the study of Sen [13] comparing the complementary alternative medicine methods used by healthcare professionals and non-healthcare professionals, the first three complementary treatment methods heard by healthcare professionals were hot-cold application (95.3%), acupuncture (82.6%), and cupping (79.3%), it has been reported that less than 20% of healthcare workers have heard of mesotherapy, apitherapy, osteopathy, neural therapy, and homeopathy practices. Çevik et al. [14] examined nurses' knowledge and views on complementary and alternative medicine in a study they planned. As a result of the study, it was reported that the first three applications that nurses have never heard of were chiropraxia (83.7%), shiatsu and homeopathy (71.4%), and bioresonance (66.5%), respectively. The first three practices that they had sufficient knowledge were stated as dietary support (22.2%), yoga (13.3%) and meditation (13.3%). Lafcı and Kasıkçı [15] stated that acupuncture, herbal therapy, dietary support and massage are the methods that healthcare professionals know the most about. In this study, acupuncture was found to be the most commonly heard method with a rate of 53.7%, and the unheard method was found to be karyopractic (81.0%). It was determined that the best known method in all aspects was hydrotherapy with only 5.8% (Table 4). Considering the results of the study, it is thought that healthcare professionals have more information about the methods that are popular today. In addition, according to the results of the study examined, it was seen that the occupational groups heard and knew almost the same methods. It is seen that the methods officially accepted in our country in the Regulation on Traditional and Complementary Medicine Practices dated 2014 numbered 29152 slightly affect the knowledge of that method [26]. The reason why complementary therapy and supportive care methods are very low among healthcare professionals is thought to be due to the fact that these methods are not adequately processed neither in pre-graduate education nor in post-graduate education.

In order to provide holistic care in healthcare institutions, it is not enough to know complementary therapy and supportive care methods, and it is very important to use them [27]. While some of them are included in basic nursing/midwifery practices, the rate of using these methods, which require some special training before implementation, will be a step to be used to see the future [28]. Shorofi and Arbon [29] examined nurses' knowledge, practices and attitudes about complementary and alternative medicine in Australia. As a result of the study, it was reported that 49.7% of the nurses used the relevant methods on their patients, and the most widely used method was massage. In the study conducted by Bahall and Legall [30] to examine the knowledge, attitudes and practices of healthcare professionals about alternative medicine in Trinidad and Tobago, it was stated that 82.3% of the participants used the methods, the rate of use was affected by gender, race and profession. Lafcı and Kaşıkçı [15] stated that a quarter of the healthcare professionals they included in the study used at least one of the complementary therapy and supportive care methods. They reported that herbal therapy and massage took the first place in use. According to the results of the study conducted by Wardle et al. [31] in 2013 to examine the referral behaviors of general practitioners to physicians practicing complementary and alternative medicine, it was found that only 2.7% of general practitioners refer patients once a month. Samuels et al. [32] found that most of the midwives and nurses (87.3%) used these methods in the study in which nurses and midwives working in the maternity services in Israel evaluated the use of complementary and

alternative medicine and their attitudes on this issue. It was stated that the most used methods in the study were massage (67.1%), herbal medicine (48.6%), meditation/yoga (42.2%), respectively. Only 30.6% of the participants in this study stated that they used these methods. While almost all of them (90.9%) think that the applications will facilitate the birth and increase the pain control, the rate of practicing is very low. It was seen that the most used method was massage with a rate of 14.0%, followed by positioning and hot-cold application with a rate of 12.4%. The methods that were never used (0.0%) were found to be acupuncture, reflexology, phytotherapy, music, acupressure, homeopathy, hypnotherapy and chiropractic (Table 4). When the results of the study are evaluated, it is seen that the methods used are similar, while the rate of using the methods is higher in some countries. This can be explained by the deciding on the usefulness of the relevant methods and their use before and widespread. In our country, with the increase of information exchange, it will be supported and their usage will be widespread. However, it is thought that education and certification programs approved by the Ministry of Health are required for this.

The majority of the participants (86.0%) mentioned the importance of in-service training in order to spread the use of complementary therapy and supportive care methods among healthcare professionals. In addition, it is highly recommended to provide information to prenatal pregnant women about these methods (80.2%) and to provide suitable environment and materials for the application (75.2%). In this way, it is thought that the problems encountered such as rejection of the method by the pregnant or inability to apply due to lack of material will be eliminated.

Attitudes towards these methods as well as the training given to healthcare professionals on complementary therapy are also very effective in their practice. As a result of the study of Shorofi and Arbon [29], it was reported that 22.4% of the nurses had a very positive attitude and 36.6% had a partially positive attitude towards complementary therapy and supportive care methods. In the study of Bahall and Legall [30], 62.3% of doctors and 64.0% of nurses were shown to have a positive attitude that complementary therapy and supportive care methods would improve health. In the study of Samuels et al. [32], most of the participants gave high scores to items indicating that traditional medicine could benefit from ideas and methods, and the average attitude score (55.78 ± 9.98) was found to be high, and their attitudes were found to be positive. In this study, it was found that the attitude of healthcare professionals was positive (total attitude score mean 18.57 ± 5.12). It was determined that the independent variables such as the education of healthcare professionals, their institution, related methods provided pain control and the opinion of facilitated birth positively affected the attitude scores ($p < 0.05$). It is thought that this situation may arise from having sufficient knowledge to apply complementary therapy and supportive care methods and having a suitable environment to practice. Although the number of doctors participating in the study is small ($n: 17$), the fact that the average attitude scores (20.58 ± 8.13) are higher than the nurses and midwives (18.25 ± 4.41) shows that the education received affects the attitude. In Bahall and Legal's [30] study, which supports the results of the study, it was reported that doctors were more interested in obtaining information about complementary therapies compared to other healthcare professionals. It is thought that the difference in attitude points between the doctor and the midwife / nurse is also influenced by the autonomy of the applications. The

midwife / population ratio Turkey, despite being in a better position now than many OECD countries, Turkey midwife autonomy of independent initiatives is low and is not supported by existing legislation [33]. Turkey Regulation No. 29152 dated 2014, shows that in authorizing the use of methods behalf of physicians [26]. This reduces the interest of midwives and nurses on the subject. For this reason, it can be said that the application of related methods and their attitude towards these methods are lower. It can be said that the professional independence of midwives/nurses and their competence in applying complementary therapies and supportive care methods need to be increased in order for the mother-friendly hospital practices to reach their full goals and to increase maternal and infant health.

Conclusion

In this study, it was seen that the best known method by healthcare professionals working in mother-friendly hospitals was hydrotherapy (water birth), and the most used method was massage. It has been concluded that healthcare professionals mostly have positive opinions about complementary therapies and supportive care methods. In order to support this positive attitude, necessary planning should be made, considering the contribution of in-service trainings. It is considered necessary to include complementary therapies and supportive care methods in pre-graduate and post-graduate in-service trainings in order to provide the highest standards of care in order to improve maternal and postnatal health. In addition, it is important to support midwives and nurses with regulations on implementation and to increase scientific studies that will create evidence.

Declarations

Ethics approval and consent to participate

Ethical approval was obtained from the Health Sciences Ethics Committee of Manisa Celal Bayar University (No: 21194).

Consent for publication

Verbal and written consents of all healthcare personnel participating in the study were obtained.

Availability of data and materials

The datasets used in this study are available from the corresponding author upon reasonable request.

Competing interests

The authors declare that they have no competing interests.

Funding

This research is an The Scientific Research Projects Coordination Unit of Manisa Celal Bayar University project (Project No: 2018-156).

Authors' contributions

NB, SKD and EBT designed the study. ED and EK performed data collection and data analysis. NB, SKD and EBT wrote the manuscript. All authors read and approved the final manuscript.

Acknowledgements

We would like to thank The Scientific Research Projects Coordinator of Manisa Celal Bayar University, who funded the research, and the healthcare personnel who agreed to participate in the study.

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