

## Positive experiences of childbirth: a phenomenological study

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**Abstract: Background:** childbirth is a social, psychological and physiological phenomenon and experiences of childbirth would have wide and deep impact on the on the emotional and psychological health of women and their families, so the design a model is useful to create and promote positive experiences for improving maternal health and labor and knowledge of family. To design such a model, a deep knowledge about the factors influencing positive birth experience is necessary. This study is carried out aimed to explore and describe the experiences were positive labor and subsequent delivery model was designed to create and promote positive experiences. **Materials and Methods:** This study used as a phenomenological approach. Participants than among women who had their first pregnancy and delivery and data collection were selected based on an open and non-structured interviews and the number of participants was 22, according to data saturation and seven-step Colaizzi method was used for analysis. **Results:** The main finding of the present study was to extract a sense of confidence and other concepts included: belief in God, protecting midwives, knowledge and readiness for delivery, sense of control, normal progress of labor, maternal and neonatal health, and the design model of the seven concepts were used. **Conclusion:** Considering the basic factors that create a positive birth experience, faith in God, midwife support awareness and preparedness are enjoying coordinating activities of project team to create and promote positive experiences midwife managed delivery model obtained with the synergistic effects create and promote positive experiences in labor and women's empowerment is effective.

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### Introduction:

Child delivery is an important event beyond normal human experience (Carles, 1997). Today's delivery as a social phenomenon, there is a psychological and physiological phenomena (Larkin, 2009). Abundant evidence shows that what happens during delivery obstetrics deep and widespread effects on emotional and mental health of women leaving their families (bis et al., 2008; Green, 1990; Ohara, 1996).

If the experience is positive and good delivery, many changes occur in a woman's life.

Can be of great illumination or have experienced great success with her self and thus such fundamental change her behavior change (Maslow, 1995).

Positive birth experience, was very satisfactory, with short-term and long-term benefits are great positive attitude to the role of maternal emotional connection and relationship with the baby and loving mother to cope with motherhood and maternal self-esteem and helped lead to the mother and baby are healthy (Larkin, 2009; bis et al., 2008; Godman, 2004). In contrast, negative birth experience detrimental effects on the health of the baby's mother had led to psychosocial effects such as maternal anxiety, depression, post-traumatic stress disorder is coping with negative effects on cognitive function

and postnatal lead to adverse psychological effects on the family and his mother is (Larkin, 2009; Godman, 2004; Yohana 2003). Due to the effects of childbirth experiences, identifies factors and factors that lead to a positive birth experience, are complete and satisfactory is very important (Gibines and Thompson, 2001).

Research conducted by Milinder in 2006, showed that the five main categories relaxed atmosphere, the normal delivery time, delivery logic, sense of control and security, to create a good birth experience.

The study, conducted by Gibines and Thomson in 2001 entitled "The discovery and description of the expectations and experiences of labor" that all women wanted to participate actively in Labor and essence of a "feeling of control", which was sponsored by his wife, positive attitude midwife care during pregnancy and delivery, and provide information during pregnancy and labor by a midwife and empowerment and participation in decision making in the delivery process has been achieved.

A physiological and psychological experience such as childbirth is to a large extent influenced by cultural and social norms (McCool, 2004).

Due to cultural, behavioral attitudes, values and personal beliefs will determine the person's response to pain is influenced by different cultures, which is

different (Taylor, 2003).

Based on extensive experience in the delivery of maternal and family influences, due to the complexity, diversity, labor experiences in identified studies and a few studies about the experiences of the majority of previous studies in this field of labor in the country, this qualitative study aimed to explore and describe the positive experiences of childbirth.

#### Materials and Methods:

In this study, a phenomenological approach to gain a deep understanding of the factors contributing to the positive experience of childbirth is used, this qualitative study attempts to document the human experience and the context in which it occurs is described. Husserl's philosophy has been used in this study. The willingness and attitude to experience the true sense of reality and a new way to improve maternal health care is discussed.

Participants in the first phase of accepting the conditions of this study include first pregnancy, low risk pregnancy, gestational age of 36 weeks, age 18 and older, willingness and enthusiasm to participate in the study. In the first study, after 36 weeks of pregnancy interviews to explore women's expectations about the delivery, then the participants in the first interview, those who had positive experiences of labor and delivery process satisfaction were selected for a second interview. Eligible subjects were selected using purposive sampling.

The researcher introduced the study and expressed their confidence and trust in the confidentiality of the participants interviewed by them and permission to record the interview and be free to withdraw from the study at any time and consideration of ethical issues, the interview in a quiet and private educational units Imam Hussain and open questions for 60-45 minutes had done.

Structured and non-structured interviews were used for data collection. Preliminary interviews were conducted at baseline, the primary interview begins. General question was posed as follows:

Please give us your positive experiences in their delivery, the delivery to the end, and talk to me. Multiple research methods to obtain more information

and purer provided feedback to participants requested further explanation, the question again, speculation and the use of nonverbal language used. Starting date of sampling was September 2012 and time of sampling until data saturation (22 participants) continued (July 2013). In qualitative research, repeated notice or repeated themes with Highlights, indicating adequate sample size is (Estrabuet and Carpenter, 2003), meaning that after interviews with 22 participants, no experience with other new international speech was seen and all we repeated the experiments described previously.

The researcher presuppositions of experience, literature and previous research had identified and put aside and review was postponed until after the completion of data analysis, statistical analysis was performed using the seven-step Colaizzi.

The strength of this research study was used to measure reliability and credibility. The credibility findings, participants were referred to the codes extracted and confirmed their findings were valid, the results of the individual codes are extracted in qualitative research refers to the validity of the findings should be confirmed in their views. To ensure reliable results, the researcher, the research process is explained in detail and explained in detail how to achieve the results and outcomes may help other researchers in understanding how (bronze and Grove, 2005).

#### Findings:

The mean age of the women was 24 years (20-28 years). Bachelor of Education participants 5, 6 and 9 associate degree and third was 2 year. The 22 participants in this study were 6 people employed and the rest of the house. All participants had given birth for the first time. Positive findings from the experiences of birth mothers, the main concept of 7, 18 and 72 sub-code concept emerged. The main concepts of faith in God, midwife support, awareness and readiness for delivery, feel confident, feel in control, normal labor progress and maternal and neonatal health was the main finding of this study was to feel confident. Each of the main concepts and sub quotes from participants are presented.

Major and sub-concepts of research

The main concepts	Sub-concepts
Faith in God	Trust in God and relationship with him, trying to acquire the knowledge, care and support efforts
midwives support	Emotional support, informational support, physical support
Awareness and Readiness for delivery	Knowledge and information, to prepare
Feel confident	Relax, feel safe
Feeling in control	Making ability, ability to work, the ability to control pain, ability to control emotions and behaviors
Normal progress of labor	Normal delivery time, no need to intervene
Mother and baby health	Maternal health, infant health

**Faith in God:**

Of all participants, the first and most important factor to feel confident and positive experiences of childbirth is faith in God. Faith and confidence in God peace in one's heart and cause him to assist in overcoming problems and ability to use cognitive and behavioral skills for coping with problems and pain would increases.

Sub concepts and codes of belief in God

Sub-concepts	Code
Trust in God and relationship with God	Entrust everything to God, trust in God, and praying for God, asking God to pray to, resort to prayer, vow to God
Efforts to acquire knowledge	In preparation for childbirth classes, inquiring of others, reading books about pregnancy and childbirth
Efforts to support care	Regular visit to the clinic, refer to clinic

Sub-concepts and clauses of belief in God

Sub-concepts	Sentences
Trust in God and relationship with God	I entrusted everything to God and I was sure that would help me make sure that I take care of the pain, because I trust in God, God's voice when I was in pain and he wanted to help, wanted God to give me strength to do good delivery, I pray the Lord my health and my kids wanted for my children's health Imams (AS) was invoked, I had vowed to myself and my children
Efforts to acquire knowledge	Information on issues of religion, we recommend reading the book so I would try to find the necessary knowledge about labor, delivery, or good, knew the life we should have the information so I would childbirth courses preparedness.
Efforts to support care	Trust God to take care of the child health clinic I went to check. Went to the clinic for pregnancy care and felt that midwives and doctors are the means through which God helps me

**Support midwife:**

The participants supported the cause of midwives feel confident in providing information regarding the right to health of both mother and fetus during labor by allowing collaboration and facilitate the delivery of safe and effective role in the creation has a positive birth experience.

Sub concepts and code to support midwives

Sub-concepts	Code
Emotional support	Respect and kindness, reassure, encourage, respectful attitude, patience, empathy
Information protection	Help, explain, advise, inform
Physical protection	Maternal control, maternal health care, access to advances in birth control, attention to cleanliness, to help massage the mother's vital signs monitor, fetal heart rate monitoring, good performance childbirth, infant care, attention to the child's identity

A sample of the clauses on the protection of participants midwife

Sub-concepts	Sentences
Emotional support	I was comfortable with her cheerful and kind to the midwives me when I was feeling her. I was hoping he would give me strength, encouragement encouraging words, Mama would treat me with respect, even when I was so bored I became restless. Timely delivery can say I know your pain a little too much, I'm going to tolerate.
Information Protection	I explained what happened, telling me what to do to make the pain less, after delivery, check how much left to say, he informed me of the progress of delivery.
Physical support	A good midwife and my situation and I feel I can control, I feel confident when I take care of my health, the focus is equipment needed me to check the progress of my birth control would be important to regularly clean, massage can help me, pressure and pulse regularly controlled baby heartbeat monitor to regularly Well done to her dominant after drying the baby's birth, show me and my kids wrote a profile

**Acquire knowledge and readiness for delivery:**

Each of the participants to acquire knowledge and develop a sense of confidence in their preparation for the

delivery of important factors is considered. In fact, for information leading to an expected level of pain, ability, participation, cooperation and sense of control and decision making in labor and delivery will lead to positive experiences.

Sub concepts and terms related to awareness and readiness for delivery

Sub-concepts	Sentences
Having knowledge and information	Knowing the pain of labor and it helped me to be comfortable, because I feel that the knowledge and information, I was calm because I knew how labor would be. Information on preparing for childbirth classes, I gained was very useful for me. I was hopeful because a lot of information about labor and I knew what happens.
Being prepared	I feel I have to prepare for labor and would work well with the midwives I thought that I was ready to relax

**Feel confident:**

Of all participants feel confident, positive birth experience is the key factor that controls the feeling, the natural progression of labor and maternal and child labor is caused by positive experiences.

Sub concepts and codes related to feel confident

Sub-concepts	Codes
Relaxation	Having a calm, calmness, certainty, having faith
Feeling of security	having faith, relieved to be assured

Sub concepts and sentences related to feel confident

Sub-concepts	Sentences
Relaxation	Name and remember God gave me peace, I was silent because I had given everything to God, God was certainly great to help me, I wholeheartedly believe that every time I need God to help us provide
Feeling of security	They took comfort in the thought I had prepared myself for labor, I'm sure that I wanted help from God, and it was comforting because God knew His people always helps, support and guidance to the midwife gave me strength, and confidence

**Sense of control:**

Of all participants, having a sense of control is very important in creating a positive birth experience was the ability to participate in decision-making, cooperation in labor and delivery, pain management, and the ability to control emotions and behaviors with positive experiences and developing a sense of control, leading to labor.

Sub concepts and codes related to sense of control

Sub-concepts	Codes
Ability to participate in decision-making	Asking the mother, the mother is allowed to choose
Ability to cooperation	Rotate the waist, bucking fit, good work
The ability to control pain	Breathing techniques, relaxation methods, and resistance tolerance, trust in God, positive images
The ability to control emotions and behaviors	Behavior control, patience, consistency

Sub concepts and sentences related to sense of control

Sub-concepts	Sentences
Ability to participate in decision-making	Well, that was a question I could not feel the pain of the mates, and I was happy to control. What I'm asking is that I've mastered a standing or long-drawn feel.
Ability to cooperation	According to the midwife turned down for kids' waist hip rotation was used. Convenient and timely delivery, good, because I could dribble force. Preparation and delivery of led collaboration as well.
The ability to control pain	By breathing techniques that I had learned, I tried to ease my pain, through relaxation techniques that I learned in kindergarten class; I relax my body, less pain after delivery.
The ability to control emotions and behaviors	I was intractable pain when I decided, because I was sure that God had come back from the pain, the pain was a little more than I thought I saw the pain, the pain, I knew already I have to myself I would try to adapt myself.

**Normal progress of labor:**

The majority of participants had a normal progress of labor involved in creating a positive experience of childbirth, the normal duration of labor and lack of experiment prevention of mother's fatigue and fear and stress, and activity limitation due to the exclusion of the mother, a good opportunity to participate freely and active the mother.

Sub concepts and codes related to normal progress of labor

Sub concepts	Codes
Normal delivery time	Rapid progress, right time
No need for intervention	No need medication, you do not need surgery, childbirth, physiological

Sub concepts and sentences related to normal progress of labor

Sub concepts	Sentences
Normal delivery time	The whole maternity lasted 7 hours and I was fine, rapid progress was 5 hours of labor, I was so glad it was over quickly.
No need for intervention	Went well and did not need the drugs, maternity, maternity natural childbirth, I did not want the surgery. I'm glad I got pregnant naturally.

Maternal and neonatal health: the participants, their health and their baby's delivery were effective in creating positive experiences.

Sub concepts and codes related to maternal and neonatal health

Sub concepts	Codes
Mother health	Happiness, their health, their health due to thanksgiving
Infant health	Thanksgiving due to the baby's health, baby's health and suffering amnesia, a sense of re-birth and infant health

Sub concepts and sentences related to maternal and neonatal health

Sub concepts	Sentences
Mother health	Of those who did wrong, I was happy healthy pregnancy, immediately after delivery, we thank God for my health
Infant health	Once I have kids I'm going to forget all the pain and shock. I thanked God I'm up to my baby, the baby did show me that I'm feeling I'm born again.

**Discussion:**

The results show that the main concepts of faith in God, midwife support, awareness and readiness for delivery, feel confident, feel in control, the natural progression of labor and maternal and child labor involved in creating positive experiences and would be beneficial. Some of the findings of this study are consistent with other studies, studies show that a sense of control (Borchson et al., 2007; Wendy et al. 2007; Godman 2004, Radman, 2004; Lavender et al., 1999). Communicate and receive care and support in the process of making deliveries (Borchson et al., 2007; Huck et al 2007, Lavender et al, 1999) and receive (Huck et al 2007; Lavender 1999) creates positive experiences of labor.

Researchers birth experience unique, personalized, unique, special and complex to describe. Many women have the birth experience is unique, influenced by factors such as active communication

with caregivers, the amount of perceived pain, perceived control, given the nature of care and the results of labor is the (Larkin, 2009).

The main finding of this study is to extract and feel confident. Ensuring women's ability to cope with labor, the labor has been identified as a predictor of positive experiences (Larkin 2009, Gibines and Thompson 2001, Wendy et al 2007, Grove and Vanbayer 1989). Effect on women's perception of women through the delivery process to ensure compatibility with the meanings and interpretations of labor affects labor is considered (I.P. 2007).

The findings of this study indicate that the admonishing mothers of three important factors in order of importance are: faith in God, support and training of a midwife. We study the basic effects, creating a broad and deep faith in God and feel confident, calm and positive birth experiences that have been reported in previous studies.

Faith stronger in mothers a very important factor in creating a sense of confidence and the positive experience of birth. In fact, women who have a religious affiliation, they participate in the creation and delivery of value and meaning to their experience and due to the appeal of God and trust in him and trying to get support, awareness and readiness for delivery matter of being more relaxed and confident and better able to cope with the pain and problems of cognitive and behavioral skills that would make sense to use them is birth control and positive experiences.

One of the most faiths in God, the soul, the heart, confidence and character of God is (Hosseini, 2008), Almighty Allah says in the Quran:

"Those who believe, remember Allah hearts are gentle, certainly the remembrance of Allah hearts are gentle" (Surah Raad, verse 28).

The faith is a powerful force in fitness, faith gives meaning to everything and man is strong in the face of the world, special prayers and religious activities, which are usually positive fitness tools to solve problems and alleviate the suffering of the working process and to facilitate personal growth. Religion to create meaning, mastery and respect, in an optimistic attitude creates and runs that provide social support him (Bernard et al, 2011).

In many traditions from the Imams (AS) entered the loving kindness prayer and seeking God and reading the Quran tremendous impact in easing the pain of labor and delivery are (Bihar al-Anwar) reciting verses of the perfect 35 Sooreh Maryam verses and division of labor during construction or have been recommended (Najafi, 1997)

When the pain the person is experiencing high levels of emotional pain that a person can reduce this problem while maintaining harmony with the faith and religious tolerance level can raise their tolerance for pain can (Carroll et al., 2011 ) because of strong faith can increase pain tolerance (Pouladi, 2006).

Several studies have been conducted on the effects of relaxation and sedation in our praying; reading the Quran is to hear (Valizadeh, 2009; Mohammaditabar, 2012; Moussavi 2002).

The results show that the support of midwives, also experiences a major impact on the delivery, the mother is a positive experience that these findings are confirmed by other studies (Dahlen et al. 2008; Hadnet 2003, Valdenstrem 1999, Fraser 1999, Agden 1998; Aynkyn et al. 1995, neo 1994, Tu 1996, Berg et al 1996, Simkin 1992).

Research shows that effective protection by making sure the midwife during labor and delivery, and care received psychological support from positive perceptions (Kennedy et al, 2008), Increasing confidence and participation opportunities for women, the feeling of control over them (Ford et al 2009,

Miles 1390, Larkin 2009) and to cause relaxation and reduce fear and anxiety, catecholamine secretion and reduce pain and improve contractile power of the uterus, leading to rapid advance of delivery (Patricia, 2004), reduce the length of labor, delivery, obstetric and surgical interventions, and increased self-esteem, satisfaction with childbirth is a positive experience (Miles 1390, Pascal 2004, Bahri et al, 2005; Hadnet et al, 1989).

Because most of the positive experiences of labor support, midwife, midwives and women are high quality and appropriate communication (Berg et al 1996, Haldours Dotir et al 1996, Walsh 1999, Fraser 1999, Hadnet 1999, Lavender et al 1999, Sibold 1999, Valdenstrum , 2008 and Simikin 1996)

Bilateral relationship based on trust, midwives and women, through the provision of appropriate information and encouragement and understanding woman, the midwife enhance the confidence of women (nike 2010, Mc Kurt 2005, Huber 2009, Friedman et al 2009, Yam et al, 2007) and providing the possibility of participation, cooperation and increased choice and control over the woman during labor and delivery events and processes are (kit Zingr 1983 and 1988). Because they are so confident of their core competencies and rely upon, without the need for relief medication, can cause vaginal delivery (Nike, 2010).

Several studies show support for midwife care, reducing maternal infections, fetal death, low score and neonatal infections caused maternal and infant. (Patricia, 2004; Hadnet 2003, Akli et al 1996). Continuous support during labor and delivery, midwife improves maternal and fetal outcomes. (Miles, 2011)

The study received support from a midwife during pregnancy and after delivery is also considered valuable in terms of support from their midwife is considered very important. According to research conducted by the and Thomson in 2001 , according to the mother during pregnancy , received valuable support from his wife and the postpartum period , has received significant support from partner and midwives .lack of support from their husbands until the assessment is important.

#### **Awareness and Readiness for delivery:**

This study shows that awareness and preparation for childbirth labor is an important factor to create positive experiences. This finding is consistent with results of other studies in this field.

Working mothers and their ability to participate in decisions related to the delivery of assurance that the information is about (Belix Layndestorm et al, 2004).

Research conducted in China showed that the

promotion of women's education increases the ability to cope with labor and delivery, they will feel confident and self-efficacy (IP et al, 2009).

Melzak and colleagues showed in a study of women who had a vaginal delivery stage of readiness earlier than those without prior preparation on the basis of about 30 percent of pain measurement less pain experienced (Melzak, 1994). Women during pregnancy and childbirth are prepared well for the right information, realistic expectations of higher levels of pain, disability, and they feel less high certainty that they in turn will lead to positive experiences of childbirth (Lali and colleagues, 2008).

Attend classes in preparation for childbirth during pregnancy has two major advantages:

First, notice women find that birth is painful and can prepare yourself mentally and intellectually and psychologically can afford the labor.

Second, learn the various methods of pain relief such as relaxation techniques and breathing techniques during labor and delivery and give them a sense of control and ability to make (Gibons and Thamsom 2001).

Learn relaxation techniques to reduce stress and anxiety cause, the promotion of mental health are women. (Bastani et al 2005).

Use breathing techniques to reduce fear concerns a fundamental solution for peace of mind, sense of control, comfort, and relief from the pain of labor. (Hunter 2009, Nichols 2000, Simikin and Boulding 2004).

Prepare for childbirth, midwives can play a crucial role and the feelings and attitudes of women and women's innate ability to foster trust, provide the appropriate information to deal with the pain of labor in women with a calm and confident with partner in labor and delivery, increase their self-esteem and sense of control and cause birth experiences are positive (Hiens et al, 2012).

This study shows that having a sense of control by the mother of one of the major causes of preterm labor are positive experiences, the ability to participate in the major decisions related to mother in labor, working ability, the ability to control pain and ability to control his emotions and behaviors can be achieved. This finding fits well with the results of other research in this area (Olbers' 2007, Milinder 2006).

Numerous studies show that having a sense of control significantly increases the positive experiences of delivery and maternal satisfaction and make sense of their emotional health after delivery is complete (Larkin 2009, Gibons and Thompson 2001, Hawke and Technology Week 2007, Ford et al 2009, Kennedy et al 2008, Godman 2004, Radman 2007, Valdenstrom 1999).

Long-term benefits of having a sense of control

(Hyvmnyk 1981) and acted as a buffer to reduce labor pain and increased satisfaction (Wendy et al, 2007). Many researchers have focused on understanding the control by women during labor and skills is necessary for a satisfactory supply expectations, even if is not. (During et al 1980, Bramadat and Dryjr 1993, Green 1993, Asld et al 1993, Gibons and Thompson 2001, Ranta et al, 2000).

In some women, the pain is eliminated, as labor is an important factor in creating a positive experience, but in others, the pain of labor and may lack the experience of the loss is the feeling of control. The ability of women to control birth experience affects the perception of pain (Larkin 2009).

For women trying to feel good in spite of having labor pains, which means they are trying to access is for personal growth and maturity (Nistido et al, 2006).

The present study shows that the natural progression of labor on positive experiences so that it is effectively normal term labor and lack of obstetric and surgical interventions (The use of the drug to induce labor and strengthen the application of vacuum, do the episiotomy and cesarean section) is to create positive experiences of birth mothers, this finding is confirmed by other research.

Perform episiotomy and cesarean section), the mother is a positive experience, that these findings are confirmed by other studies. Fan and colleagues study demonstrated that a large number of women with normal labor process is expected to be normal and without any medical intervention (2005). Research conducted in 2006 by Milinder that women tend to perform interventions such as labor induction, cesarean and epidural had wanted a natural labor is possible.

Research shows that induction of labor is decreased satisfaction (Leakage 2005, Bramadat 1994, Salmon et al 1992, Valdenstrom 1999) as well as the prolonged labor and instrumental vaginal delivery due to damage to the health of the baby, childbirth has a negative effect on satisfaction (Valdenstrom 1996, Ranta et al, 1995).

In the long process of labor and obstetric and surgical interventions with fatigue, fear, and limitation of motion mother (due to the use of monitors and infusion), established physical and psychological complications in the mother feeling collaboration control, fear, anxiety, and increased dependence on him, leading to discomfort and feelings of the mother is negative (Nistido et al 2006).

The results of this study are inconsistent with some research results as Greene and his colleagues show that the proportion of women requesting epidural analgesia has increased from 9% to 26%. They actually represent an increase in obstetric

interventions tend to be (2003) and the research done by indicate that induction of labor does not affect the experience (2004). Seem to medically manage labor (using medical instruments and methods to manage birth) women with low self-esteem, feeling of control, dependence and increases their willingness to medical intervention.

**Mother and child health**

The findings of this study suggest that a birth outcome in a positive birth experience is important to the health of the mother and the baby's birth is a positive experience. These findings are consistent with results of other studies in this field. Due to the dynamic nature of the labor, delivery experience psychological processes such results can be affected. For example, when the baby is healthy, women will feel more positive experiences, while disease and neonatal complications and hospitalizations caused

her to be a negative experience of labor (Candy et al., 2008).

The results showed that mothers' expectations of receiving support from a midwife and having a sense of control and security was delivered to collaboration and the natural progression of labor and the positive experiences of the mother's preferences the constant presence of participation of labor a wife, Although he did not provide mothers had positive experiences.

Hadnet says that is not a slight difference between expectations and preferences, expectations are generally aware of what is available is based on the personal preferences of dreams (2002).

It seems that women provide realistic expectations, create a positive birth experience and the preferences of the maternal obstetric promote positive experiences will be secure.

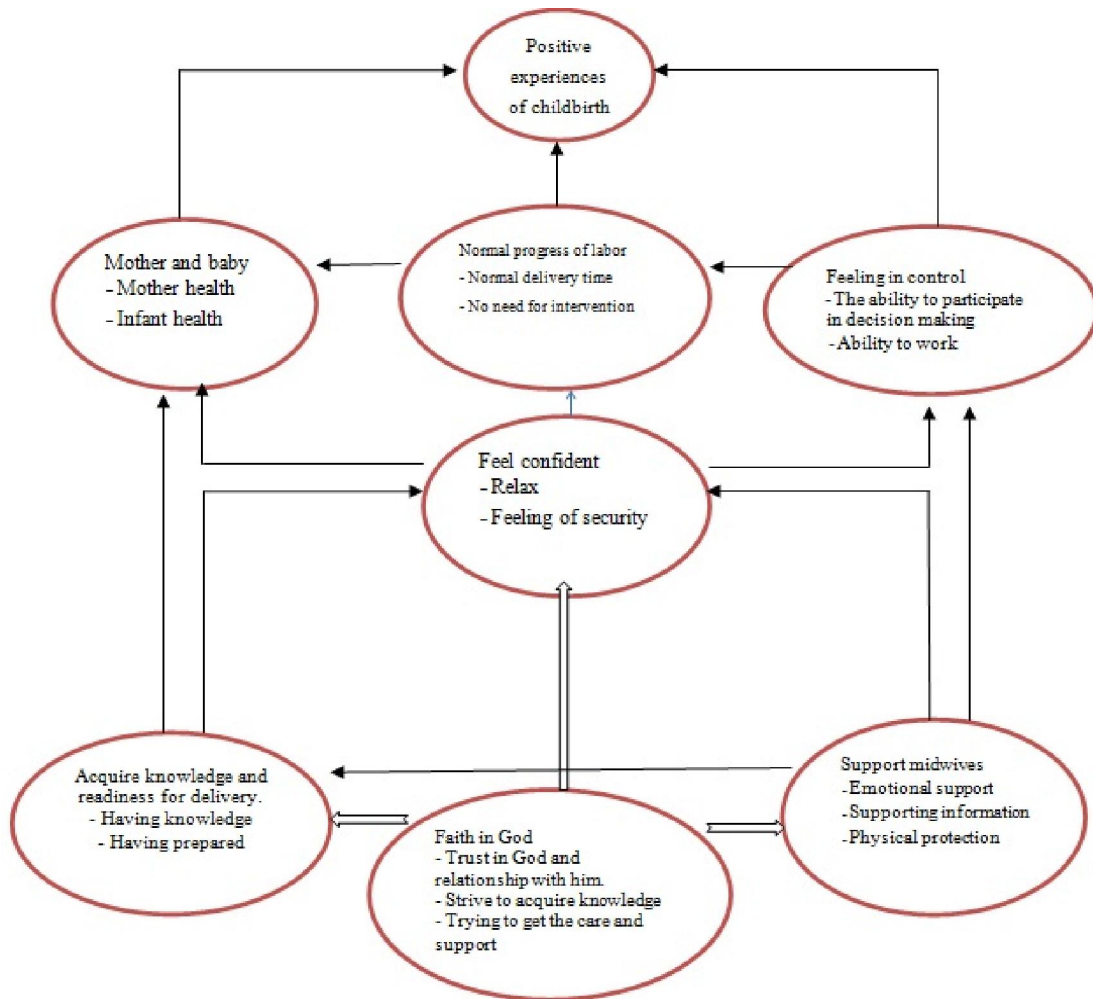


Figure 1: Model development and promote positive experiences of childbirth



**Conclusion:**

Extracts and main finding of this study is to feel confident that the first and most important factor to ensure a positive birth experience, faith in God, the second factor and the third factor supporting the midwives' knowledge and readiness for pregnancy and childbirth are the results of a model study and promote positive birth experience is presented (Figure 1).

Given the multiple dimensions of labor needed to make the project delivery promotion of positive experiences with the use of experts in various fields of religious, cultural, social, psychology, physiology, sport and Midwifery (Figure 2) for the administration and coordination of this important project is central to a person's needs, according to the conditions and characteristics of fields such as knowledge and understanding of the processes of pregnancy and childbirth and physical needs, mental women, she can design and organization of different programs and management of educational members team to create and promote positive experiences during pregnancy, labor and delivery, empowering women and promoting the science and practice of psychological and spiritual role of health have a positive.

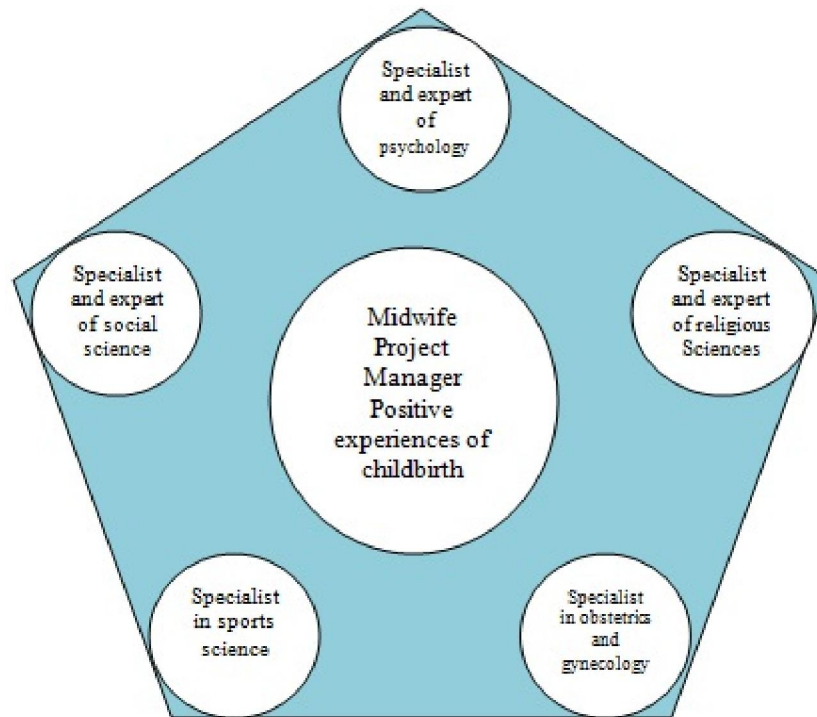


Figure 2: Project team members had positive experiences of childbirth

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