

Publication**Cultural practices during pregnancy and birth among the Giriama community in coastal Kenya: a qualitative study****JournalArticle (Originalarbeit in einer wissenschaftlichen Zeitschrift)****ID** 4646196**Author(s)** Ombere, S. O.; Haller, T.; Nyambedha, E.; Merten, S.**Author(s) at UniBasel** [Merten, Sonja](#) ;**Year** 2021**Title** Cultural practices during pregnancy and birth among the Giriama community in coastal Kenya: a qualitative study**Journal** Int J Childbirth**Volume** 11**Number** 4**Pages / Article-Number** 154-165

Pregnancy and childbirth are almost universally associated with culturally based ceremonies and rituals. Although the importance of giving birth in a healthcare facility is recognized among the Giriama community, many mothers continue to give birth in the village with traditional midwives. This ethnographic study explored the cultural context and practices of birthing among the indigenous Giriama of Kenya and how such practices may affect maternal and neonatal outcomes. DESIGN: We utilized qualitative interviews and focus group discussions. Study participants included 40 mothers and 5 traditional birth attendants (TBAs) also known as the traditional midwives. RESULTS: A majority of women who were interviewed shunned hospital delivery because it did not fit their cultural beliefs on what constitutes an acceptable pregnancy journey. The study revealed cultural practices that supported women's health and well-being and cultural practices that were harmful. According to Giriama culture, for a successful delivery, expectant mothers are supposed to avoid viewing dead bodies, to abstain from intercourse, and to observe certain dietary restrictions. Wives are required to continue to give birth until they reach menopause, when their eggs are "finished." Wives are also required to properly dispose of the placenta by burying it to ensure their future fertility. DISCUSSION: Identifying and understanding local customs, beliefs, and practices, particularly those that may be harmful to pregnant women, while leaving in place those that carry no harm, are critical to developing community-based strategies for improving maternal and neonatal health. Moreover, collaboration with the community may lead to changes in lieu of cultural practices in such a way that safety in childbirth is enhanced. There is need for awareness of the potential effects of the lack of decision-making power of women, particularly in relation to needed maternity care.

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