

### **N432 Clinical Cultural Report: Labor and Deliver with the Dutch Culture**

The Dutch believe that childbirth is not a medical condition and is a natural and physical process. The Dutch believe that labor pains are essential in developing a bond between the mother and the baby. Many hospitals do not guarantee medications at all, especially an epidural. Doctors or gynecologists often are not involved unless there are complications (Access Netherlands, 2021). As a nurse, when taking care of a Dutch patient, this may help you know that they will want very low monitoring during their stay and most likely want a natural birth. A Dutch midwife will be present when giving birth in place of an obstetrician. A patient from the Dutch culture may feel uneasy about a physician delivering their baby since the midwife is generally with them for the whole laboring process and only has a three-to-four-year degree, unlike midwives in the United States (Hermus et al., 2017). As a nurse it is important to help minimize their fears of the physician delivering their baby, and why it is important that they do instead of the nurse. When medical interventions such as pain medications, epidurals, continuous fetal monitoring, and labor induction occur, an obstetrician takes over the care, but this does not happen in many cases (Klomp et al., 2016). Midwives know that evidence shows that pain relief and epidurals are not associated with a positive childbirth experience (Klomp et al., 2016). The Dutch midwives believe that labor is a psychological process and has a significant role in the relationship between the mother and her newborn baby. Birth hormones are released, which help manage labor pain without pharmacological pain relief (Klomp et al., 2016). Midwives help the mothers who are in labor work with the pain. During the care, the mother may need lots of support from the nursing with controlling the pain and knowing how to cope with it despite being monitored. Dutch culture uses both male and female midwives (Hermus et al., 2017). Knowing they use male providers would let us know they would be okay with a male provider.

Midwives also believe that their partners play a vital role in controlling labor pain. The midwife is responsible for informing the partner on the laboring process and how they should be involved (Klomp et al., 2016). The nurse may have to educate the partner on what to support the mother in labor. The partner should help their partner when giving birth by using support, encouragement, and pain control techniques such as breathing, massaging, and distraction (Klomp et al., 2016). After the child's birth, it is tradition to eat muisjes, referred to as "biscuits with mice." This snack does not contain mice and is just a sprinkle-like candy that is the color of the baby's gender on top of a twice-baked bread (Acosta, 2019). The muisjes were thought to stimulate lactation and are a symbol of fertility which is still used today (Acosta, 2019). The family will likely have these to eat after their birth to celebrate.

The Netherlands, where the Dutch primarily live, is known to be one of the best places to live. In Dutch culture, the mothers often work part-time due to their culture. The dads also usually choose a four-day workweek to spend more time with their children and believe in taking an equal role in child-rearing and household chores (Acosta, 2019). The Dutch work an average of 29 hours per week which is the lowest industrialization in the nation (Court, 2021). Working fewer hours makes for better family life, and the children are often happier due to the quality time they receive with their parents. The mothers receive 16-week maternity leave and a 5-week paternity leave paid by the Dutch government (Court, 2021). They may have fears about the United States on their maternity leaves and that the government does not pay them. As a nurse it is important to help with minimizing their fears. Concerning the mother and father of the child, they often share the same duties and are viewed as equal (Court, 2021). With the mother and father being viewed as similar, they both communicate effectively concerning care. Overall, the Dutch culture has many things that they do in the birthing process and after, so it is essential to give them the birthing experience they want.

## References

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- Klomp, T., de Jonge, A., Hutton, E. K., Hers, S., & Lagro-Janssen, A. L. (2016). Perceptions of labour pain management of Dutch primary care midwives: A focus group study. *BMC Pregnancy and Childbirth*, 16(1). <https://doi.org/10.1186/s12884-015-0795-6>

|  | 10 points   | 5 points   | 0 points  | Points |
|--|---|--|---|--------|
| Description of the culture<br>1. Accurately describes the local prevalence of people in this ethnic group/culture  | Includes complete information regarding the culture.  | 1-2 of the key components are not filled in correctly.     | 3 or more of the key components are not filled in correctly and therefore no points were awarded for this section |        |
|  | 10 points   | 5 points   | 0 points  | Points |
| Discusses the core values of the culture chosen.<br>1. Describes the religious beliefs of the ethnic group/culture.<br>2. Describes how pain and suffering is viewed by people of this culture.<br>3. Describes the common structure of the family in the culture.<br>4. Describes communication norms for the culture<br>5. Describes dietary routines of the culture | Includes complete information regarding the culture.<br>Each section is filled out appropriately. | 1-2 of the key components is missing detailed information. | 3 or more of the key components are not filled in correctly   |        |

|   | 10 points  | 5 point  | 0 points   | Points |
|---|--|--|--|--------|
| Discusses the implications of these core values on health care including the childbearing experience.   | Includes complete information regarding the implications of these core values on healthcare including the childbearing experience.   | 1-2 of the key components are missing.   | No implications of these core values on health care and the childbearing experience is included.   |        |
|   | 10 points  | 5 point  | 0 points   | Points |
| Provide at least three tips/suggestions/interventions your fellow students can use when working with patients of the culture you chose.   | Includes at least three tips/suggestions/interventions for fellow students to use when working with the clients of the culture chosen.   | 1-2 of the key components are missing.   | No tips/suggestions/interventions for fellow students to use when working with the clients of the culture chosen are included.   |        |
| Written report and overall APA format   | 5 Points   | 2.5 Points   | 0 Points   | Points |
| <b>Written report</b><br><br><b>APA Format</b> <ul style="list-style-type: none"> <li>• The student used appropriate APA in text citations and listed all appropriate references in APA format.</li> <li>• Source(s) utilized should be 5 or less years old. <ul style="list-style-type: none"> <li>o Source(s) greater than 5 years old will not be accepted.</li> </ul> </li> </ul> | <p>Written report with at least two appropriate references submitted to the drop box by the date/time assigned</p> <p>APA format was completed and appropriate.</p> <p>Grammar and spelling were professional and without errors</p> | <p>Written report with at least two appropriate references submitted to the drop box by the date/time assigned but while APA format was used, it was not correct with 1-2 errors noted. 1-2 grammar errors or overall poor writing style was used.</p> <p>Content was difficult to</p> | <p>Written report not submitted to the drop box by the date/time assigned or no APA format or 3 or more errors noted.</p> <p>Source(s) utilized were greater than 5 years old.</p> <p>Grammar or writing style did not demonstrate collegiate level writing with 3 or more errors noted.</p> |        |

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| <ul style="list-style-type: none"> <li>Professional writing style and grammar was used in all narrative sections.</li> </ul> |            | understand. |  |  |
|  |            |             |  |  |
| <b>Instructor Comments:</b>  |            |             |  |  |
| <b>Total Points Awarded</b>  | <b>/50</b> |             |  |  |

Grading rubric (Must achieve 77% i.e. 38.5 points to pass. Not passing constitutes failure of clinical and the course.)