Immigrant women's experiences of maternity services in Canada: a meta-ethnography

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BACKGROUND
1. Globally, international migration has increased in recent years and it is expected to rise during the 21st century: as result, immigration has increased in all Canadian provinces and territories but the highest rates of natural increase and international migration were in Alberta.
2. With respect to access to and reception of effective maternity healthcare services by immigrant women, existing research evidence suggests that barriers exist which may include cultural misunderstandings, communication difficulties, and racism among others. Further challenges may also present during navigation of the Canadian healthcare system especially as relates to maternity services.
3. This knowledge synthesis of qualitative data contributes to a multidisciplinary, mixed methods research study investigating how to reduce or eliminate the disparity experienced by immigrant women in accessing and navigating maternity care services in Alberta.

Aim of meta-ethnography:
To describe how immigrant women experience maternity services in Canada.

METHODOLOGY & METHODS
1. To develop an inductive and interpretive form of qualitative research synthesis, a meta–ethnography is being undertaken using Noblit and Hare's (1988) theoretical approach as modified by Campbell et al. (2011).
2. The approach consists of a seven–phase process essentially involving a comparative textual analysis of published qualitative studies, involving selection of relevant empirical studies to be synthesized, reading them repeatedly, and noting down key concepts (metaphors) which leads to the synthesis.
3. The translation of key concepts from one study to another is idiomatic, thus involving translating the meaning of the text (even if not explicitly identified) to derive second and third–order concepts that encompass more than offered by any individual study.

Figure 1
Literature search and selection flow diagram

Records identified through database searching (n= 388)
Additional records identified through other sources (n= 5)
Records after duplicates removed (n= 300)
Full text articles excluded with reasons (n= 19)
Full text articles accessed for eligibility (n= 41)
Records excluded (n= 259)
Articles included in meta–ethnography (n=22)

DATA ANALYSIS
1. Atlas.ti software (ATLAS.ti Scientific Software Development GmbH) is being used to store, manage and classify the studies.
2. Characterized by identification and classification of data with progression to abstract generalizations and explaining patterns.
3. An iterative process with preliminary interpretations challenged and data revisited in the light of further data collections and new insights into the data.

EXPECTED OUTCOMES & KNOWLEDGE TRANSLATION
Findings and synthesis of a number of qualitative studies are expected to offer new insights related to conceptual and theoretical knowledge relevant to the experience of immigrant women within the maternity healthcare arena.

Seven Steps of Noblit and Hare's (1988) Meta–Ethnography
1) Getting started – topic selection
2) Describing what is relevant – decisions about inclusion criteria and quality assessment of included studies
3) Reading the studies – organizing key concepts
4) Determining how the studies are related– organizing studies thematically
5) Translating the studies into one another within first–order interpretations to achieve second–order interpretation
6) Synthesizing translation – how findings relate to each other within first–order interpretations and across second–order interpretations
7) Expressing the synthesis – publishing findings in a healthcare journal and communicating at relevant conferences

References:

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