Hong Kong Mothers and Emotional Sustainability via UN Sustainable Development Goal #3 Wellness and #16 Peace

Shirley MC Yeung¹*, Milky Lau²

¹²Gratia Christian College, Hong Kong
Author E-mail: shirleymc@gmail.com

ABSTRACT

Under COVID-19, a triangulation among well-beings (people), wellness (state of emotion), and wellness in job satisfaction (tasks) is worth exploring with research and intervention projects. In this paper, thirteen papers on “new wellness skills” published in 2020 were found relevant to this area with factors identified with association to wellness. They included a raisin diet, grapes nutrition awareness, antioxidants, happiness emotion and adaptiveness. Moreover, the use of web-based midwifery postnatal programs is suggested to improve new mothers’ self-efficacy, providing social support on role transition and advocating early bonding between parents and newborn. The project fulfilled two sustainable development goals (SDGs) of the United Nations (UN) #3 Good Health and well-being.

Kata Kunci: Welling Being, UNSDGs, Wellness Skills.

INTRODUCTION

Unique challenges for Hong Kong mothers
Mothers in Hong Kong face unique stresses because of the Chinese culture. These include stresses from the adherence to the harmonious and loving role of a housewife / mother expected in the Chinese Confucian values (Ngai et al., 2011), and adherence to a full one-month home confinement.

Many mothers find it stressful to live up to the responsibilities of housekeeping and childcare and show respect and obedience to the parents-in-law (Chan, Williamson & McCutcheon, 2009; Gao et al., 2010). When women fail to fulfil the expected duties and obligations, they would be made to feel guilty and ashamed. They also become doubtful, if not fearful, that they could not develop the ‘good-enough’ childcare skills. Ngai et al. (2011) has found that this traditional Chinese cultural value negatively impacts mothers’ self-esteem and suppresses their maternal role competence development.

Furthermore, Chan et al. (2009) found that the average number of stressful events experienced
by postnatal women were higher in Chinese women than Caucasian women. The need to adhere to the “doing the month” ritual is another remarkable stressful event. The ritual consists of a multitude of restrictions on diet and lifestyle as well as a confinement to home and being cared for by female family members for a full month (Ngai et al., 2011). New mothers find this disruptive to their routine lifestyle and intrusive to their privacy as they receive excessive attention and monitoring by their family members during the postpartum period (Chan et al., 2009; Gao et al. 2010; Ngai, & Chan, 2012). Because Chinese women are taught to be lenient and not to complain to their family members, they feel helpless and that they need to put up with the ritual.

This stress from the traditional Chinese practice might explain why Chinese postnatal women have low levels of maternal role competence and maternal satisfaction and, thus requiring on average six months to adapt to the maternal role (Gao et al. 2010; Ngai, & Chan, 2012). These could also partly explain the high prevalence of postnatal mood disorder (Chan et al., 2009; Gao et al. 2010; Ngai et al., 2011), suffered by 40-80% of postnatal women in Hong Kong (FHS, 2019).

Affirming the Need

Although faced with additional challenges, Hong Kong mothers receive limited support from the Hospital Authority on material role transition from their postnatal care services, partly limited by the current policy and resources but most importantly, there is no active scheme in providing support to facilitate the maternal role transition.

In Hong Kong, nearly 60,000 new-borns are born every year of which around 70% are delivered in a HA hospital (Hospital Authority, 2019). This makes inpatient beds of postnatal wards in constant demand and shortage. Most HA hospitals adopt an early discharge policy for medically stable mothers where they are aimed to be discharged within 24 to 48 hours after admission if it is not a complicated delivery. As the available time to remain as an inpatient for the mothers is very limited, most postnatal care is focused on monitoring the maternal and newborn physical health. Little support or nursing intervention is provided to facilitate maternal role transition. In terms of midwifery support, during hospitalisation, new mothers will receive personal and basic new-born caring skills introduced by midwives. Upon discharge, the midwives will introduce the Maternal Child Health Care services (MCHCs) to new mothers for their postnatal check-up at six weeks postpartum and other child health and development care according to the MCHCs’ arrangement. They usually will also introduce the lactation clinic to mothers in case they need professional advice on breastfeeding after discharge. Finally, they will distribute to all postnatal women a booklet about parenting (Happy Parenting) published by the Department of Health (DH) to support their role transition.

Currently, postnatal women in Hong Kong rely on self-education or professional advice from a postnatal helpline during the postpartum period. The MCHCs only provide one postnatal check-up and one postnatal depression screening six weeks after delivery. There are no services or nursing interventions from the public health institutions to facilitate the maternal role transition for low-risk mothers during the postpartum period (Gao et al., 2012; Ngai et al., 2009). Current support from the government needs to be improved on services provided for postnatal women.

Sharing from Acupuncture / Acupress Researcher, Australia

Under covid-19, most people, including working mothers with newborn, need to work from home, entertainment at home with stress coming from the reduction of social interaction and the increment of anxiety from worrying about job security, health uncertainty and emotional instability.

Based on the sharing from Mr. Alan Yeung, a researcher in KMPG with academic background in Traditional Chinese Medicinal Studies-
acupuncture that frustration very often comes from spending too much time in information which is a tiring mental process, making us lose energy and creating an impact to our mental health."

**Wellness Re-Visit**

"Wellness means different things, and it is a broad terminology to different people, different industries and different places," said Mr. Yeung.

There is a triangulation among well-beings (people), wellness (state of emotion), and wellness in job satisfaction (tasks). According to Mr. Yeung, job satisfaction may lead to emotional wellness. In fact, it is hard to achieve. Under covid-19, people need to work from home with less physical activities and human interaction. In order to regulate emotion, identify the mental state of oneself, and develop a mindset of self-care techniques with business opportunities, it is time to re-visit the use of acupoint press from a generic perspective and educate the community.

"For example, acupoint "Stomach 36" is good for digestion after eating too much after festive seasons or cook-at-home, acupoint of "Governing Vessel 24.5" is good for regulating stress and acupoint of "Liver 3" (happiness point - the space between the big toe and 2nd toe) is helpful to lessen anger, stress, and frustration," said Mr. Yeung.

We need to have a mindset of "Balancing our Emotion" for flexibility and adaptability. And, information curation (an art of screening contents with reliable sources from the internet to enhance the processing of learning) is also needed to reduce stress and anxiety for a sustainable lifestyle with wellness.

**METHODS**

**New Wellness Skills for Hong Kong Mothers for Balancing Emotion**

A study was conducted by Yeung (2020) to explore the development of new wellness skills under Covid-19. Literature search using the keyword, “new wellness skills” on papers published in 2020 was carried out. Thirteen papers were found relevant. Review of the papers showed that some factors were associated with wellness. They included raisin diet, grapes nutrition awareness, antioxidant, happiness emotion and adaptiveness. To further examine whether the factors had impact on wellness, a text search using the above factors as keywords was done on the 13 papers with Nvivo. Findings indicated that grapes nutrition awareness and raisin diet were mentioned in 9 and 6 papers with 114 and 249 references respectively. Happiness Emotion was cited 148 times in 1 paper (Table 1).

**RESULTS AND DISCUSSION**

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<th>Factor/Keyword</th>
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<td>Wellness</td>
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<td>Raisin Diet</td>
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Having reviewed the papers with special focus on the influence of the most mentioned factors on wellness, relationships between them were established with the following model for Hong Kong mothers to be considered for wellness.
Discussion on Proposed Intervention Program
Web-based Postnatal midwifery intervention in Hong Kong Society to new postnatal women (Within six weeks postpartum)

Current Situations
In current Hong Kong postnatal service, the postnatal mothers relied on maternal-child health centre (MCHCs) provide once postnatal physical and psychological checkup at six weeks postpartum and "Doing the month" assisted by female family members or certified postnatal care helpers. The majority of postnatal mother and postnatal care helper focus on maternal physical healing from pregnancy and labour instead of maternal role transition and parenting. According to the World Health Organization (WHO) suggested the new concepts of postnatal care that health care should provide support on maternal role transition and parenting (WHO, 2010). Therefore, a Hong Kong private hospital Matilda International Hospital launched community postnatal midwifery service in 2018 with positive feedbacks (Matilda, 2018). They provide home visits by midwives to eight weeks postpartum for giving professional support and assistance while equipping new mothers with knowledge and skills for newborn care and themselves with confidence. Moreover, the midwives would advocate early bonding through the skin to skin contact, baby massage and breastfeeding. Last but not least, they will discuss with mothers on their emotions and postnatal experiences to support maternal role transition. Unfortunately, this unique community service is stopped in early 2020 because of the COVID-19 pandemic.

In this circumstance, the innovative project for maintain continue professional postnatal service for new mothers is needed in Hong Kong society. From the reviewed RCTs studies from Singapore, the “mHealth” app-based postnatal education program helped support a multi-ethnic sample of parents during the postnatal period in Singapore (Shorey & Dennis, 2018). Moreover, compared with home- based postnatal care, the web-based intervention had better effects on improving parents’ self- efficicy, social support and postnatal depression in new mothers (Jiao, et, al., 2019). Since Singapore's socioeconomic and Chinese culture background are similar to Hong Kong, thus, the web- based postnatal intervention would able to be adopted.

Project Aim:
Use the web-based midwifery postnatal program as the sustainable method to improve new mothers ‘self-efficacy, provide social support on role transition and advocate early bonding between parents and newborn.

Project Objectives
1. To establish a sustainable evidenced based a web-based midwifery postnatal program.
2. To use the web-based midwifery postnatal program to improve new mothers ‘self efficacy.
3. To adopt the web-based method to provide social support on parental role transition and advocate early bonding between parents and newborn.

Aim of Research
Find out the latest evidence on using web-based midwifery postnatal program on enhancing maternal self-efficacy in six weeks postpartum.

Objectives of Research
1. To systematically review the current evidence on using web-based midwifery postnatal program on enhancing maternal self-efficacy in six weeks postpartum.
2. To synthesize and analyze the research findings draw out from the selected research studies.

Research Questions
Does web-based midwifery intervention is sufficient to improve new mothers 'self-efficacy, provide social support on role transition and advocate early bonding between parents and newborn?

Keywords of Literature
“Postnatal care”, “Web-based”, “New mothers”, “Early Postnatal”
Expected Outcome
- New Mothers attended the first web-based postnatal seminar in the first week postpartum.
- New mothers or baby care providers with knowledge and skills for newborn care and themselves with confidence.
- New mothers or baby care providers with knowledge and methods on building first bonding and attachment with her newborn.
- New Mothers received a web-based individual interview by the midwife.
- New mothers were assessed with improving on self-efficacy.
- Number of mothers do baby massage to newborn.
- Frequency of the new mothers do baby massage to her newborn.

Methodology
Convenient Sampling Method
Recruit new mothers who are in the first week postpartum by sending program introduction to new mothers’ “WhatsApp” groups or parental online discussion forum “Baby-Kingdom”. Then, select the participants according to the inclusion and exclusion criteria.

Expected Impacts
- New mothers improved self-efficacy because of web-based support by a midwife.
- New mothers enhanced knowledge and skill on baby care and self-care after web-based midwifery interventions.
- New mothers and baby care provider established a new practice on building bonding with the newborn.
- Provide positive thinking and support to postnatal mothers in Hong Kong under COVID-19.

Measurements
- Chinese Version Parenting Sense of Competence Scale (C-POCS).
- Number of mothers join the weekly web-based seminar.
- Number of mothers do skin to skin with the newborn.
- Frequency of the new mothers do skin to skin with her newborn.
- Number of mothers continues exclusive breastfeeding till six weeks postpartum.

CONCLUSION AND RECOMMENDATIONS
The project can fulfill two sustainable development goals (SDGs) of the United Nations (UN).

# 3 Good Health and well-being
These targets of Goals 3 are 3.1 reduce maternal mortality ratio, 3.2 end preventable deaths of newborns, and 3.4 reduce premature mortality from non-communicable disease.

Since the high-quality postnatal care and education are critical to prevent maternal and newborn mortality, because the mother with knowledge and skills, they will alter the sign and symptom of postpartum haemorrhage of themselves and alter her newborn with neonatal jaundice or umbilical cord infection. Also, the mother able to take care of her baby with provide an adequate amount of milk, prepare formula milk with clean and hot water, disinfecting milk bottles etc.

Moreover, the innovative project aims to provide social support to improve maternal self-efficacy. While the new mother has high self-efficacy, they would less suffer from postnatal depression. Since the postnatal depression ranked as no.1 non-communicable disease caused maternal mortality over the world, there are 40%-80% postnatal women experienced postnatal blue in Hong Kong. Thus, the innovative program can advocate positive thinking and maternal-infant bonding which help to reduce the number of mothers suffer from postnatal mood problem.

#4 Quality Education (From Midwife to parents)
Provide quality postnatal education from midwife to postnatal mother/ Pui Yu/ family members, enhance the quality of baby care and mother care.

#5 Gender Equality
Raise the awareness of postnatal care for women, let husband and family understand their needs to provide support for emotional and baby care.

#9 Industry, Innovation and Infrastructure

The Web-based midwifery postnatal care is the innovation in the medical industry. Traditionally, the nursing interventions are providing by the face-to-face method. However, due to COVID-19 pandemic, the human should maintain social distance to prevent disease transmission. This project used the new technology and midwives’ professional knowledge transfer to maintain the quality of postnatal care to overcome the social distance restriction. Moreover, the midwives can promote good bonding and attachment between newborns and parents or care providers.

This proposed intervention project adopted two aspects of CSR: Environment and Community: 1) Environment - The web-based postnatal midwifery care reduces using of transportation, the air pollution will improve due to less using vehicles; and 2) Community More low income or lower-class families can receive high quality postnatal care and education, because most of them without extra money to employ postnatal care assistance, just care by female family members.

To conclude, the proposed project is expected to attract a target of 500 postnatal women (less than 3 months after delivery) for a half-year business intervention pilot project named “Local Pui Yu” / postnatal assistant center to pilot this service with the support from IT companies on the techniques and devices to be needed to create the impacts and make the impacts transparent. And, it is expected that IT companies and/or invited NGOs can support the total costs, for example, marketing cost, education material cost, and recruitment cost in employing midwives. Consequently, a new and easier method to deliver professional education with revenue creation business model will be created to support women and families, promote women, family and neonatal help; enhancing the awareness of women health, family and work balance issues.

REFERENCES


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