Evaluating the implementation of Mother-Friendly Hospital Steps in Qazvin, Iran

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Introduction
Delivery is a spontaneous process that needs no intervention (1); however, it is considered a disease due to the process of medicalization. Some factors have been identified to contribute to pregnancy and delivery as a disease, including increasing the rate of cesarean section (C-section) in Iran (2) and the world (3, 4), prolonged fasting at hospitals, increasing episiotomy and its complications (5, 6), and prolonged hospitalization (3, 4).

Fearing labor pain and feeling of loneliness during pregnancy are the predictors of labor pain and distress that may increase the risk of emergency C-section and rate of elective C-section. However, C-section is not the solution, and fear may remain over the postpartum period leading to considering labor an unpleasant experience (7). Application of new labor methods, such as Mother-Friendly Hospital Initiative, as well as nonpharmacological and supportive...