

EDITORIAL

A New Page in the History of Midwifery Education in Lithuania

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The modern history of midwifery started in Kaunas, where Professor Pranas Mažylis opened the High Courses of Midwifery in 1920. This, in fact, became a milestone of the development of women's health care in Lithuania during the last century. The role of midwives was changing over years. Due to a lack of the maternal and child health care system, economical constraints, lack of medical doctors, and respect to the important profession, midwives from the beginning of their career used to become independent specialists. Later, during the Soviet times, the role of midwives was diminished to the position of a doctor's assistant without any possibility to make any individual clinical decisions and with very limited responsibility. Despite these constraints, midwives continued to play an important role in the maternity issues.

There have been promising changes toward the development of an independent prestigious specialty of midwifery during the last decade. The Lithuanian Association of Midwives has played an important role in this process, preparing all the required documentation for work rules and regulations, organizing postgraduate education programs, promoting breastfeeding, and taking an active part in the process of gaining the name of a "baby-friendly" hospital. With the support and encouragement of some leading obstetricians-gynecologists, midwives have started to practice independently at labor wards, taking care after low-risk delivering women. The results after one year of independent work show that midwife-led care is as safe as obstetrician-gynecologist-led care in low-risk deliveries (1). The next step and challenge for midwives was to take full responsibility for a normal postpartum period and look after the mother and the newborn. At the beginning, there were some doubts and distrust of their own competence, but after a short transition period, all team members and, most importantly mothers, recognized high professionalism of colleagues midwives.

It should be mentioned that during the last few years, some of the outstanding midwives have become instructors of international interactive courses (ALSO, BALS0). As experts, they give master classes sharing skills and knowledge with colleagues

in Kazakhstan, Azerbaijan, Tajikistan, etc. International work helps them grow as professionals and teachers and increase confidence in independent and responsible work.

With the establishment of the bachelor's study program of midwifery in the Lithuanian University of Health Sciences in 2010, a new page in the history of women and newborns' health care was opened in Lithuania. Midwives with the university degree will be able to develop midwifery as an autonomous field of medicine combining clinical practice, research, and education. The core study program is based on the international documents such as the Essential Competencies for Basic Midwifery Practice declared by the International Confederation of Midwives in 2010 (2), the International Code of Ethics for Midwives (2008) (3), etc.

The International Confederation of Midwives (ICM), the main professional organization, defines a midwife "as a responsible and accountable professional who works in partnership with women to give the necessary support, care and advice during pregnancy, labor and the postpartum period, to conduct births on the midwife's own responsibility, and to provide care for the newborn and infant. This care includes preventative measures, the promotion of normal birth, the detection of complications in mother and child, the accessing of medical care or other appropriate assistance and the carrying out of emergency measures." This statement shows an extremely wide range of competencies and responsibilities for a very special unique profession.

A modern midwife is not only the core specialist in the perinatal team; she has many more roles and obligations in the society promoting the health of women and childbearing families. The main concepts are as follows: partnership with women to promote self-care and the health of mothers, infants, and families; respect for human dignity and for women as persons with full human rights; advocacy for women; a focus on health promotion and disease prevention that views pregnancy as a normal life event.

The ICM defined 7 essential competencies for basic midwifery practice in 2010 (2). The first competency describes requisite knowledge and skills

from obstetrics, neonatology, social sciences, public health, and ethics relevant for appropriate care for women, newborns, and childbearing families.

The second competency should enable midwives to provide high-quality, culturally sensitive health education and services to everyone in the community in order to promote healthy family life, planned pregnancies, and positive parenting. These issues are not easy tasks in many societies because of different attitudes and persistence of various myths and non-scientific beliefs. The role of midwives as advocates for women's informed choice should grow.

The third, fourth, and fifth competencies emphasize the crucial role of midwives in providing high-quality antenatal, intranatal, and postpartum care. Currently, midwives are successfully working in a team of family doctors, taking full-range care after pregnant women, and leading antenatal classes for future parents. They are already able to evaluate fetal wellbeing and handle selected emergencies during labor, remarkably reducing the incidence of unfavorable outcomes of deliveries. No doubt that

our midwives will be able to screen pregnant women by ultrasound in future and will be much more involved into other health screening programs of women and newborns.

As mentioned before, neonatal care has extended the scope of midwife's expertise and responsibility as it is declared in the sixth competency.

We in Lithuania are proud of the achievements in maternal and neonatal care. To tell the truth, the incidence of infant and maternal mortality is one of rare indicators that puts us on the equal level with other developed European countries. These results have been achieved due to the systemic reorganization of the perinatal care system and consistent implementation of modern evidence-based principles of care. Midwives have been playing an important role in this process. It is time for them to recognize themselves as independent and responsible professionals, who, best of all medical professionals, appreciate and understand the needs and expectations of women. Let us help them establish the academic discipline of midwifery!

References

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