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EXPERIENCE OF STATES IN PROVIDING OBSTETRIC ASSISTANCE (MIDWIFE) TO WOMEN

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Annotation

The article analyzes the role of obstetric care in protecting the health of women of reproductive age on the basis of international experimental and scientific sources. Relying on WHO and ICM data, qualified obstetric care is based on a significant (16-33%) reduction in maternal and child mortality. The article highlights the effectiveness of the woman-oriented continuous care model, as well as the fact that the working conditions and professional satisfaction of medical workers are a factor that directly affects the safety of patients. An analysis of the experience of Germany and other European countries is cited as a theoretical basis for the reform of the health system of Uzbekistan.

Keywords: reproductive health, obstetrics, midwife, Obstetric Care

Introduction

In the reproductive period, puberty occurs at the end of puberty. According to her, perinatal birth and perinatal delivery are associated with certain health qualities [11, 13]. According to the World Health Organization (WHO), today about 290,000 women die from ovarian cancer and hearing loss, which accounts for about 75% of all cases and high-quality obstetric interventions this may be due to the fact that currently [11, 13]. Thus, improving reproductive health has become an important stage in the development of obstetric services.

The international scientific literature suggests that the role of midwives in improving the reproductive health of pregnant women is that they do not contain growth hormone. According to research by the International Confederation of Obstetricians (ICM), low-income midwives are 16-33% likely to develop

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complications in the perinatal period, and up to 20% in the perinatal period [11, 13].

The main feature of the organization of obstetric care in leading foreign countries is the fact that it is based on a model of female-oriented and uninterrupted care. In this approach, a woman is observed by the same specialists from the pre-pregnancy period to the obstetric and postpartum stages, which serves to increase the effectiveness of Medical Services [7, 12]. Freeman notes that such a model forms a trusting relationship between women and medical workers and reduces the risk of complications [7].

Thus, world experience shows that the role of Obstetricians in improving the health of women of reproductive age is a systematic, multifaceted and scientifically based activity.

This general international approach serves as a theoretical basis for the experience of the following different countries, in particular the German model and its comparison with the conditions of Uzbekistan.

Aiken L.H. An international study led by (USA) was conducted in hospitals in Germany, the United Kingdom, Sweden and other European countries, showing that there is a direct link between the professional well-being of medical workers and the safety of patients [1]. According to the results of a multi-center study conducted, Obstetricians with complications in institutions with high working conditions and professional satisfaction had a 10-15% decrease in births, while patient safety indicators were reliably high [1]. In this study, it was scientifically substantiated that improved working conditions of Obstetricians increase the quality of assistance provided to women of reproductive age.

Bazirete O. in their studies, however, it was noted that the practice of caesarean section in maternity institutions where the obstetrics-led care model was used decreased by 18-25%, while the female satisfaction with the delivery process was 80-90% [5, 20].

Statistics show that the role of Obstetricians in maintaining and improving the health of women of reproductive age is confirmed not only by theoretical, but also by specific clinical and demographic indicators.

In international studies, it is argued that the functions of Obstetricians include family planning, mental health support, and postpartum care, rather than being

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limited to the birth process alone [7, 17, 18]. A scoping review study conducted by Stoodley shows the important role of Obstetricians in strengthening the bond between mother and child [17].

In recent years, the midwife-led care, that is, the midwife-led care model, has been widely introduced in developed countries. In this model, Obstetricians act as the main responsible specialist in normal pregnancy and childbirth [5, 20]. In studies by Bazirete and co-authors, obstetrician-led birth centers have been shown to reduce the number of medical interventions and improve maternal and child health indicators [5].

In the experience of Scandinavian countries, obstetricians are recognized as the main consultants on a healthy lifestyle, in particular, proper nutrition and elimination of harmful habits [9, 16]. Research by Olloqui-Mundet has shown that dietary recommendations under obstetric control significantly reduce the risk of pathologies during pregnancy [16].

Also, the obstetrician-led care model used in the UK and Australian health care system is highly cost effective in addition to medical efficacy [3]. Scientists (Aleshin and Donnellan-Fernandez) note that this model ensures system stability. At the same time, female satisfaction (80-90%) from the level of care in obstetric centers is much higher than in the traditional physician-controlled system (60-70%) [5, 20]. International experience shows that the extended competence and high qualifications of obstetricians are an important factor in improving the health of women of reproductive age. Researchers such as Bazirete, Janke, Kranz argue that the development of obstetric care in their work is closely related to improving maternal and child health indicators [5, 12, 14]. Therefore, a systematic study of the experience of leading foreign countries and adaptation to national conditions is an urgent scientific task.

Another of the factors affecting the quality of obstetric services is the working conditions and professional satisfaction of specialists. As a result of the scoping review conducted by Wangler and co-authors, the workload, social support and professional development opportunities of Obstetricians have been found to be directly related to their quality of Service [19]. Aiken and co-authors have also scientifically substantiated that the well-being of medical workers directly affects patient safety [1].

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The results of an ssoping Review by Wangler covering several countries in Europe showed that Obstetrics ' professional satisfaction and the quality of service provided by them are strongly correlated, which, along with improving reproductive health outcomes, increases women's satisfaction and treatment effectiveness [19].

Scientific studies show that regular psychological support provided by obstetricians significantly reduces the risk of postpartum depression. Stoodley's studies found that psychoemotional assistance with obstetrician participation reduced the risk of developing postpartum depression by 25-40% [6, 10, 17].

In addition to the physical health of women of reproductive age, their mental state also plays an important role. Scientific studies show that psychoemotional stress and mental difficulties are common during the perinatal period, such as postpartum depression and other mental disorders in about 13% of women around the world, while in developing countries the figure reached up to 19.8% [8].

According to research conducted in Indonesia, about 26% of postnatal women have had mental health problems, including depression and anxiety States, and obstetricians play an important role in providing psychological support to these women [2].

The results of a randomized study conducted in Islam showed that the psychosocial support program (MFPSS) given by obstetricians and family members significantly reduces postpartum depression scores in the next period (according to the EPDS assessment) and this effect is maintained for 3 months [4]. Such results confirm the positive effects of psychological and social interventions on mental health by obstetricians.

For this reason, the psychological support provided by obstetricians is important in improving postpartum mental health, as it has a strictly positive effect on the prior identification and mitigation of depressive conditions among women, as well as increasing overall psychoemotional health levels. These indicators show the demographic and clinical significance of the role and responsibility of the obstetrician with a scientific basis [6, 10, 17, 18].

The need to institutionally expand the role of Obstetricians in the sustainable improvement of the health of women of reproductive age is recognized in international sources. The reforms implemented in France (ICF) prove that the

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provision of preventive and gynecological functions to obstetricians led to the approach of the health system to women [14]..

Also, studies conducted in Germany show that midwife led care (midwife-led care) models have a positive effect on reproductive health outcomes. The results of a cohort study conducted in Germany as part of obstetric services showed that services structured through midwife led care rooms (obstetric departments under obstetrics) had a decrease in the number of medical interventions and fewer problems with the obstetric process among women, which serves to improve perinatal outcomes [19].

In addition, systematic reviews conducted on a European scale show that midwifery led continuity models of care (obstetrics-led models of uninterrupted care) reduces risk with improvements in obstetric outcomes in caesarean sections, uncomplicated births and other clinical indicators, with academic training and expanded competence playing a key role [14, 19].

In a number of studies, it is noted that models of assistance, led by obstetricians, lead to positive results in the management of physiological pregnancy and childbirth. Such models have noted a decrease in the number of excessive medical interventions, a decrease in the incidence of caesarean section practice, and an increase in female satisfaction with the delivery process [15]. The authors show that the fact that obstetricians interact closely with a woman, take an individual approach and have psychological support is an important factor in facilitating the process of childbirth.

Preventive activities of obstetricians are important in strengthening reproductive health. According to research [17], their explanatory work on pregnancy planning, contraception and infection protection with women of reproductive age is a key factor in the premature prevention of diseases.

The participation of Obstetricians in the postpartum period is also widely covered in international scientific sources. In particular, it has been argued that the active participation of Obstetricians in issues such as postnatal care, breastfeeding support, early detection of postpartum depression, and psychological support is important for maternal and infant health. They note that regular patronage services provided by obstetricians in the postpartum period serve to reduce the number of complications [7].

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In some studies, the experience of using non-medicinal pain relievers of Obstetricians has been studied. Such methods include breathing techniques, relaxation, movement activity, massage, and the use of obstetric elements in water [15]. The results of the study showed that these methods reduce fear in women in relation to the labor process, relieve pain sensations and improve the general psychological state.

Also, a number of scientific works highlight that the professional training and level of education of Obstetricians have a direct impact on their effectiveness in practice [17]. Academically trained Obstetricians with advanced clinical thinking will be able to detect complex conditions in time and cooperate effectively with the doctor. This is important in preventing perinatal complications.

The role of Obstetricians in the team structure was also analyzed in foreign studies. Many authors argue that effective cooperation between obstetrician, doctor and nurse increases the quality of Medical Services [7]. The distribution of specific tasks and the designation of professional competencies provide continuity in the obstetric service.

At the same time, in some studies, factors hindering the functioning of obstetricians were also indicated. Among them are the limitations of professional independence, insufficient formation of regulatory framework, high workload and limited opportunities for professional development [Maleki M.etc.]. The authors argue that by eliminating these problems, it is possible to increase the effectiveness of obstetric service.

Conclusion

It is worth noting that world scientific sources assess obstetric activities as a multidisciplinary (clinical, preventive and psychological) system for the protection of women's health. Analysis shows that independent care provided by obstetricians has high efficacy in reducing the risk of maternal and child death and complications. In particular, on the example of Germany, the academic knowledge and legal status of Obstetricians prove to be the main factor in the development of the field.

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