

REVIEW

of dissertation on the topic:

"OBSTETRIC CARE FOR WOMEN AFTER BIRTH - APPROACHES AND OPPORTUNITIES FOR OPTIMIZATION THE ROLE OF THE MIDWIFE "

to the doctoral student: Romyana Nikolova Laleva

for the award of the educational and scientific degree "Doctor"

in the field of higher education: 7. Health and sports,

professional field: 7.4. Public health,

by specialty: Health Care Management

Reviewer: Prof. Dr. Sonya Koleva Toncheva, PHD

Director of Shumen Branch, MU - Varna

Member of the Scientific Jury, according to Order 109-497/22.11.2021

Of The Rector of the Medical University "Prof. Dr. P. Stoyanov "- Varna

Details of the procedure

Romyana Nikolova Laleva is enrolled as a doctoral student in an independent form of study for the acquisition of educational and scientific degree "Doctor" in the field of higher education: 7. Health and sports, professional field 7.4. Public health, majoring in "Health Care Management" at the Department of Health care ", Faculty of Public Health of the Medical University - Varna, according to the Order of the Rector № R -109-226 / 27.03.2020. Scientific adviser Assoc. Prof. Valya Dimitrova, PHD

On the grounds of art. 24 para 6 and art. 30, para 3 of RULES FOR IMPLEMENTATION OF THE LAW ON THE DEVELOPMENT OF THE ACADEMIC COMPOSITION IN THE REPUBLIC OF BULGARIA,, art. 68, para 1 of Regulations for the development of the academic staff of MU Varna and decision of Faculty Council under protocol №173/09.11.2021. of the Faculty of Public Health, successfully passed the doctoral minimum and in accordance with her readiness for public defense Romyana Nikolova Laleva was expelled with the right to defense by Order №R 109-591/29.12.2021 of the Rector of MU - Varna.

The dissertation was approved and proposed for public defense to the Department Council of the Department of Health Care at MU - Varna on 06.12.2021.

Brief biographical data and career development of the candidate

Assistant Romyana Nikolova Laleva was born in the town of Kavarna. She graduated from the Higher Medical Institute in Varna in 1990 with a degree in Midwifery. She started working as a midwife in the Obstetrics and Gynecology Department of the Municipal Hospital in Tervel (1990-1991), after

which her professional career continued in the Home for medical and social care for children - Department of Malformations, Vinitsa District in Varna (1991-1997), Specialized hospital for obstetrics and gynecological active treatment "Prof. Dr. D Stamatov "Ltd. - Varna Children's Ward, Department of Pathology of Pregnancy, Maternity Ward (1997 - 2015). In 2011 he obtained a higher education degree in Bachelor's degree in Health Care Management at the Medical University "Prof. Dr. Paraskev Stoyanov "- Varna, and in 2012 he graduated with a master's degree in the same specialty.

In the period 2015 - 2018 she is a lecturer in practice at the Department of Health Care, Public health faculty of MU - Varna. In 2018 she held the academic position of "assistant" in the same department where she still works.

Assistant Laleva has participated in over 34 forms of continuing education. Her publishing activity includes 25 publications in the field of health care and the development of the obstetric profession. In most of the publications she is a second, third and subsequent author and is in collections of participations in forums and conferences.

Laleva holds two certificates of professional qualification from the National Quality Council of the Bulgarian Association of Healthcare Professionals.

She speaks Russian and basic English.

General characteristics of the dissertation

The dissertation presented by **Rumyana Nikolova Laleva** was developed in the Department of Health Care of the Faculty of Public Health, at the Medical University - Varna. The dissertation contains 190 pages and is structured in five chapters. Includes 81 figures, 15 tables and 10 appendices. A relatively good balance has been achieved between the different parts of the dissertation - introduction 11/2 pages, literature review 42 pages, research methodology 12 pages, chapter three 65 pages, chapter four 25 pages, chapter five 3 pages, literature 11 pages. .

The bibliographic list includes 178 literature sources, of which 110 are in Cyrillic, 50 in Latin and 18 online sources. Many of the sources in the list of cited literature are incompletely presented.

Assessment of the relevance of the topic

The topic she has chosen for her dissertation **Rumyana Nikolova Laleva** is significant and very relevant. In recent years, many authors in our country study the role of midwives in health care, various aspects of midwifery in hospital and outpatient settings, including discussion of community care (T. Evtimova, V. Dimitrova, T. Boeva, S. Ilieva , D. Dimitrova, J. Lukanova, I. Serbezova, P. Dilova, D. Hadzhideleva, etc.). The modern midwife plays a key role in every aspect of women's health. This requires the midwife to have a professional response to the diverse needs of pregnant women, mothers and newborns, the expectations of society. Graduated midwives need to adapt, take on challenges, expand their professional capacity and potential, adopt innovative practices and apply new highly specialized skills, and be more responsible for patients.

The relevance of the topic of this dissertation is due to the fact that the competencies of midwives acquired during the training are an underused resource for the benefit of the community and are systematically underestimated in the care of women in the puerperium.

In this sense, the author has looked for ways to implement obstetric care in the postpartum period, when the woman - mother needs care, support and skills to raise the newborn. The most suitable specialist for counseling the recently born woman in her home is the midwife. She has professional competence to monitor the normal course of puerperium, to identify signs of pathology and refer the woman to a doctor, to train the young mother in caring for the newborn and more. Home visits after childbirth are a natural continuation of the support and care for women, but unfortunately in Bulgaria there is no regulation for patronage care, which deprives patients of the professional support of a midwife.

Literature review

The literature review is structured in **Chapter I**. The review has six main headings. Sources concerning the problem developed in the dissertation and the author's concept developed later are analyzed. The doctoral student conducted a study of various local and foreign sources, referring to the problem of postpartum care with the participation of a midwife. The professional skills that a midwife should have are also affected, as well as the legal regulations for providing obstetric care in our country.

To develop the literature review, the author relies on the opinion of other authors on her chosen problem. I believe that the structure of the literary review and the stylistic layout show insufficient skills of R. Laleva to handle literary sources and to express her own opinion on the topic of the dissertation.

I suggest to the author: The presented literature review should be further developed excluding unnecessary information that does not address the problem, such as "Obstetrics from ancient times to the present day", which presents quite popular information, lacks depth and content does not match the title. Regarding foreign experience, more sources can be sought and a more in - depth analysis of existing obstetric practices can be made. After enriching the content, the author could publish a "Guide to obstetric care after childbirth", which would help midwives in practice, as well as students majoring in "Midwife" who have the attitude to work in the field of community care.

At the end of the chapter conclusions from the literature review are made.

Staging of the scientific research

Chapter II is entitled "*Research Methodology*". In this part of the dissertation the goal, 10 tasks and 3 hypotheses are formulated and the methods for their scientific proving are provided. The author admitted significant weaknesses in the formation of the sample, including midwives, selecting those working in Maternity ward and Pathological Pregnancy, and the research problem includes activities of midwives who will work in outpatient care. I do not accept the argument presented in the dissertation that this group includes a small number of specialists, as the study could be located in Varna, Shumen, Dobrich and Targovishte, which includes respondents from other groups whose opinion was studied. I find some ignorance of the methods that are provided for the collection of primary sociological information, as there are weaknesses in their implementation.

The current survey covers a total of 672 respondents, divided into three groups:

- **Midwives** - working in the Maternity Ward and Pathological Pregnancy Sector - 94, which form 94% of all midwives working in the specified sectors at the designated medical institutions;
- **pregnant women and those giving birth for the first time** hospitalized in a maternity ward or pregnancy pathology ward / sector - 382, representing 66% of the hospitalized patients at the time of the study;
- **giving birth to a second or next child** hospitalized in a maternity ward - 196, representing 45% of the patients hospitalized at the time of the study.

The author has presented in tabular form the stages of the research, but wordings such as "Notification of the heads of observation nests" and the tool "Letters to the heads of observation nests" (third stage) are puzzling. There are 4 stages in the dissertation, and 5 stages are indicated in the abstract, which do not essentially reflect the course of the research work and the tools used.

In 2.4 the author discusses the preparation of questionnaires and presents questionnaires to study the opinion of different groups. A questionnaire for the experiment should also be discussed, but it is attached as a "map". The description of the experiment presented in this chapter is not precise.

Without discussing other weaknesses, I can summarize that the methodology developed by the author shows ignorance of basic requirements in methodological terms, which poses some risks to the reliability of the results.

Results

The results are structured in Chapter III. Chapter IV presents the practical and applied aspects of the study. An attempt was made by the doctoral student, the results proven in theoretical terms, to offer practical approaches to optimize the role of the midwife in the patronage activity, which is a good idea.

Chapter III of the dissertation, entitled "Results and discussion" presents the characteristics of the studied groups of respondents.

This chapter discusses *the factors influencing postnatal observation*. Through this opinion, the author proves that *the method of delivery and the period of pregnancy in which the birth occurred* is crucial for the recovery of the mother and for identifying obvious and potential problems in the postpartum period.

To identify the need for reorganization of obstetric care after childbirth, the author examines the participation of midwives in monitoring pregnancy. For the majority of respondents, pregnancy consulting was provided by a doctor and midwife (pregnant and first-born - 72% and multi-born - 59%). A midwife did not participate in the monitoring of pregnancy in about 1/3 of women (pregnant and first-born - 23% and multi-born - 38%). Puerperium is a period in which the care of the newborn and the care of one's own recovery after birth are superimposed. The patients in the sample express great confidence in the midwife as a specialist in the care of women in the puerperium. A significant share of respondents answered positively to the question whether they would trust midwives to care after their discharge from the maternity ward (pregnant and first-born - 73.8% and those who gave

birth to a second and subsequent child - 71.4%). The opinion of the respondents is a proof of the need to regulate home care by a midwife. The opinion of the respondents in this case may mean that the personalization of the observation by providing home care by a midwife will allow the use of other channels of communication, depending on the case. Given the possibilities of home care to create conditions for active obstetric care in the puerperium and improve access to this care by bringing them as close as possible to patients, it is important their opinion on the regulation of home care by midwives (the majority of pregnant and first-born support the idea with 79.1% and the multi-born to 75.5%). The doctoral student examines the relevance of patients' expectations and midwives' attitudes about the services that will be sought at home by patients after childbirth. Almost all midwives expect patients to need training in newborn care (97.9%) and assistance with breastfeeding difficulties (96.8%). With a slightly lower but also significant result, midwives believe that patients will need emotional support at home (81.9%). The coincidence of the opinion of the midwives and the expectations of the patients is another proof that the midwifery care in the home of the woman giving birth is the missing link in the care of women and the regulation of home care will increase the quality of health care and hence the quality of life. The opinion on the required number of home visits by a midwife in regulating home care was also studied. More than half of the respondents indicated 2-3 times as the required number of visits (pregnant and first-born - 52.4% and those who gave birth to a second and next child - 58.2%).

The author clearly formulates questions that she asks all groups of respondents and draws conclusions that prove her author's thesis. The analysis of the results outlines important problems that could be solved by overcoming the existing barriers to the institutionalization of continuing obstetric care.

In **Chapter IV**, entitled Experimental Program "Midwives in Support of Motherhood", the doctoral student could complete the author's concept if a better clarification of the experiment and quality conduct of the in-depth interview with patients was achieved. In her attempt to implement the program, the doctoral student has developed her own obstetric documentation and a **Model of obstetric patronage care** is presented schematically, which would be good to have a theoretical basis. Schematically, also without the necessary justification, a **Model of routine and intensive care in the puerperium** is presented. Obviously, the author's idea is good, but there is a lack of research precision, which takes away the models, the experiment and the insufficiently well-described activities from the interesting approach that Laleva wanted to apply.

I recommend assistant Romyana Nikolova Laleva to further develop the approaches she has highlighted in order to clarify her proposals, to make it easy to apply the experimental program in the practice of midwives, to delineate the territory of participants, to clarify roles, and thus minimize the risk of mistakes and conflicts, as well as to promote the effective work of professionals and the maximum satisfaction of patients - mothers and their children.

The need for specific competencies of the midwife is outlined by the author, as well as the opportunity for her to train parents in the implementation of patronage activities. A program for conducting postgraduate training for midwives who will provide patronage care has been proposed.

The level of anxiety was also studied, as Assistant Professor Laleva reported that the emotional state of the mother after discharge from the maternity ward depends on many endogenous and exogenous factors, difficult to measure, no clear boundaries, which requires active obstetric care to

identify factors that can be eliminated or in which the impact can be minimized. Anxiety Test was used as an opportunity to check the level of stress in the women in the sample. The initial Anxiety Test was completed by the mothers in both groups (experimental and control) when discharged from the maternity ward.

At the end of the program, the doctoral student presented the results of an in-depth interview on the benefits and potential of the program, which I do not accept because due to obviously incorrect discussion of the results I asked the doctoral student to provide me with recordings of interviews. As she herself wrote in her dissertation, she made "notes" and lacked sufficient evidence for interviews. The tools for conducting the in-depth interview can also be criticized. Moreover, results from the application of this method are presented in the Department of Health Care, in accordance with the requirements and precisely processed results.

In the future, I *recommend* the doctoral student to conduct an in-depth interview on the functioning of the Model of Routine and Intensive Care in the Puerperium for both mothers and midwives and thus could subsequently enrich the overall care provided by midwives during the puerperium .

Chapter V draws conclusions from the study and on this basis recommendations are made to various institutions related to the issues discussed in the dissertation. The author has formulated 9 main conclusions as a result of the tasks set in the dissertation.

Assistant Laleva has made recommendations to the Ministry of Health, the Bulgarian Association of Healthcare Professionals and the Medical Universities. Some of the recommendations are not in the remit of the Ministry of Health, but rather can be put before the municipal authorities, others are unclear and desirable. It would be appropriate to make recommendations to Bulgarian Association of Health Care Professionals and the Association of Bulgarian Midwives. In my opinion, a small part of the recommendations are not the subject of scientific research, but rather express the views of the author.

Evaluation of contributions

The results of the scientific research, the formulated conclusions and recommendations outline contributions of theoretical and practically - applicable nature.

The report on the contributions presented in the dissertation reflects relatively objectively the real achievements of the author. Of all the contributions presented by the author, I consider the following to be significant:

Contributions of theoretical and cognitive nature:

- Self-developed obstetric documentation for obstetric care in the puerperium is offered.
- The need for home visits for women after childbirth is justified;
- A program for a postgraduate training course for midwives counseling women in the puerperium has been prepared.

Contributions with practice - applicable nature:

- A Model for patronage care for women after childbirth has been developed.

- Introduced unified assessment of women's needs after childbirth.
- A Map for obstetric care planning has been developed;

Technically, the dissertation is designed according to the requirements. I do not want to miss the fact that many spelling mistakes are found, in some places vague sentences, ambiguous use of terms, etc. weaknesses in the style of scientific writing, which makes it difficult to perceive the dissertation.

The presented abstract basically reproduces the most important moments of the dissertation and is presented in a volume of 80 pages. There are mistakes - the scientific degree is incorrect (it is indicated as the educational degree "Doctor" as well as the specialty. Grammatical mistakes are also made.

The research portfolio of the author currently includes four actually printed scientific publications related to the dissertation, which were realized only in 2021, with which R. Laleva has met the requirements of the criteria for educational and scientific degree "Doctor".

I *recommend* the author to publish the results of the survey conducted in specialized scientific journals at home and abroad to be available to a wider range of health professionals - midwives working in outpatient care, midwifery practices and schools for pregnant women and other professionals having an interest in patronage obstetric care.

Despite the mentioned weaknesses and critical remarks of the dissertation, Assistant Professor **Rumyana Nikolova Laleva** sufficiently covers the requirements for awarding the educational and scientific degree "Doctor" accepted by MU-Varna.

In conclusion: Taking into account the criteria of the Law for the development of the academic staff in the Republic of Bulgaria, the Regulations to it and the Regulations for the development of the academic staff in MU "Prof. Dr. P. Stoyanov" - Varna, I give my positive vote and propose to the esteemed Scientific Jury doctoralstudent Rumyana Nikolova Laleva to acquire educational and scientific degree " Doctor "in" Health Care Management " .

28.01.2022

Prepared the opinion.

Prof. Dr. Sonya Toncheva, PHD

