

# Access to adequate maternal care in Eastern Europe

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## IMPACT

This dissertation contributes to our knowledge on maternal care in Eastern Europe. An important factor for good maternal health outcomes is ensuring access to adequate maternal care for all women, which is the focus of this dissertation.<sup>142</sup> Maternal care is the care women receive by maternal care providers (e.g. midwives, gynaecologists) during the antenatal, birth and postnatal period.<sup>2</sup> Adequate care means the extent to which care is safe, effective, timely, efficient, equitable and people-centred.<sup>12</sup> The motivation for this topic is the importance to obtain knowledge on and insight into the different aspects of access to adequate maternal care in Eastern Europe and to address the need for more evidence to support policies that intend to achieve better maternal health outcomes.

Maternal health is also an indicator of socio-economic circumstances and the functioning of a country's health system. Although Eastern European health system indicators (e.g. the number of health workers or coverage of the population with publicly funded maternal care) suggest quite well-resourced maternal care systems, maternal and neonatal health outcomes compare poorly with those in Western Europe.<sup>10</sup> The system-level indicators only partly indicate access to maternal care. They do not capture process-related indicators that contribute to accessing care: the distribution of facilities and services, their affordability, the appropriateness of care and its acceptance.<sup>4,11</sup> If care is available and there is an adequate supply of services, then the opportunity to obtain healthcare exists. However, the extent to which a population gains access and utilises the services also depends on financial, organisational, social and cultural aspects that have to be considered in context.<sup>13,14</sup> The available services must also be relevant, safe and effective if the population is to gain access to satisfactory health outcomes. The evidence on these matters in Eastern Europe is scattered to non-existent. Therefore, the dissertation aims to increase our understanding of access to adequate maternal care in Eastern Europe in terms of the availability, affordability, appropriateness, approachability and acceptability of maternal care.

With regards to scientific impact, this dissertation helps to start filling the identified knowledge gap by identifying barriers to access to adequate maternal care services in the Eastern European region. To do so it includes a systematic overview on access to adequate maternal care in Eastern Europe. Furthermore, as successful public health interventions require taking account of the views of relevant stakeholders, this dissertation generates new empirical evidence and understanding of the existing barriers to accessing adequate maternal care services by exploring views from multiple stakeholders (mothers, maternal care providers, decision makers) in several countries. This approach also provides a more comprehensive picture on this subject matter. To do so, it then focusses on selected Eastern European countries where evidence on this

topic is absent and MMR exceeds the average of the WHO European region. These countries are: Bulgaria, Georgia, Latvia, Moldova, Romania and Ukraine. The findings of these studies are also relevant for other countries in the Eastern European region, due to the historical similarities in political and health systems.

This dissertation has societal impact, as it is directed to the protection of mothers and their households from barriers accessing maternal care and the related poor health outcomes. More specifically, it has impact on policy implications and maternal care provision. The identified barriers provide policy makers and other relevant stakeholders with tools to further improve maternal health outcomes by addressing the barriers that limit access to and provision of adequate maternal care. The appropriate policy measures will not only enhance access to and adequacy of maternal care services, but they will also increase care satisfaction among women and will improve care-seeking behaviour in return.

As explored by this dissertation, the concentration of maternal care facilities and care provision in urban areas has a negative effect on access to adequate maternal care services in Eastern Europe. Policy solutions to increase mothers' physical and financial access to necessary care in rural areas and to ensure a more unified quality of maternal care provision are required in order to overcome the challenges of care being concentrated in urban areas. Such policy solutions should be country-specific, given the cross-country differences, but overall they could include financial protection of direct and indirect costs for maternal care among low income women in rural areas and an increased availability of adequate maternal care provision in rural areas.

Informal practices involved in maternal care provision in Eastern Europe have a negative effect on efficiency and equity in maternal care. Informalities are a societal problem, they become widespread and deeply rooted in the absence of adequate policy interventions. In addition to economic and socio-cultural measures, elimination of informal payments in maternal care requires governance measures, such as zero tolerance policies and punishment.<sup>154</sup> Moreover, suitable regulations coupled with incentives (e.g. improved working conditions and salaries, ensured quality standards of services) may help to decrease the need for informalities in maternal care provision.<sup>153</sup>

Quality and continuity of maternal care services are also compromised in Eastern Europe. There is a need for better compliance with standards and protocols, improvements in medical education and for making maternal care guidelines mandatory. Governing bodies should also regulate prices and ensure quality of services in both, private and public, maternal care sectors. Additionally, policies that protect vulnerable population groups by exempting them from (co-) payments should be put in place to reduce the financial burden of accessing adequate maternal care. Lastly, all five access-related

barriers explored in this dissertation affect the low rates of antenatal and postnatal care visits and the high rates of C-sections. In order to address this complex problem, amendments in reimbursement policies for C-section and vaginal births in public and private hospitals have been found to be an effective policy tool.<sup>183,184</sup> Furthermore, women should be informed properly on the benefits and risks of a C-section.<sup>183</sup> With regards to the use of antenatal and postnatal care services, there is a need for more information and knowledge on the benefits of these services among women, as well as on the availability of the care services that women are entitled to. The use of these services should be further promoted through (financial) incentives, such as sufficient coverage of care and the related indirect costs upon timely initiation of care.