



EBCOG

European Board and College of
Obstetrics and Gynaecology

European Board and College of Obstetrics and Gynaecology Position Statement to mark

“World Patient safety day – Safe maternal and newborn care” on 17th September 2021

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A series of ministerial summits in London and Bonn led to the establishment of World Patient Safety Day with objectives of enhancing global understanding of patient safety, increasing public engagement in health care safety and promoting global action to prevent and reduce avoidable harm in healthcare. Each year a theme is selected to highlight a particular area critical for patient safety. The theme selected for World Patient Safety Day 2021 on 17th September is “Safe maternal and new-born” care. European Board and College of Obstetrics and Gynaecology (EBCOG) welcomes this initiative as a professional representative body of 37 countries in Europe and commits to work with other global organisations to improve standards of care for women and children in pregnancy in Europe and Central Asia.

Despite significant progress made globally in reducing maternal and neonatal mortality, the SDG 3 targets are still far from being achieved¹. The issue is further complicated by the recent pandemic which had a devastating effect on various health services with low- and middle-income countries suffering the most. Even before the pandemic, everyday 810 women died from preventable causes related to pregnancy and childbirth and 94 percent of all maternal deaths occur in low and lower middle-income countries. In 2018 an estimated 6.2 million children and adolescents under the age of 15 years died mostly from preventable causes. Of these deaths, 5.3 million occurred in the first 5 years, with almost half of these in the first month of life.

Moreover, gender equity and violence affect maternity care and women’s experiences of childbirth have the potential to create a positive or negative emotional impact on them. It is therefore appropriate for organisations and stakeholders to respond to WHO’s, slogan this year to “Act now for safe and respectful childbirth” with a view to accelerate the actions necessary for ensuring safe and respectful childbirth.

EBCOG represents professional organisations of 37 countries with varied health care systems but all united with a common objective of improving health of women and their babies across Europe and beyond. Its strength lies with experts from all over Europe under one common roof. It has produced recommendation on “standards of care in obstetrics and gynaecology in Europe” which have been implemented in several European and Central Asian countries². Its position statements on current issues related to women’s health receives international acceptance and are published in the European Journal of Obstetrics and Gynaecology and Reproductive Biology.³

Health Inequalities – reducing inequalities can prevent avoidable risks and harm

Increasing health inequalities both within and between countries continue to remain a challenge for the European Union. For example, a review of health inequalities within WHO European region by WHO found that life expectancy differs significantly across the region and even in affluent countries inequities have increased. A follow-on review from the initial Marmot review 2010, in the UK shows widening of health gap between wealthy and deprived areas and even between deprived areas⁴.

Despite well-developed welfare states and healthcare systems across geographical Europe, problems of large health inequalities remain. In addition to social and health policies, it is essential to improve the social and economic conditions that make people ill in the first place. The reduction of health inequalities is a responsibility of society at large and a wide set of actors and institutions are necessary to achieve the goal of a more equal and healthy society. It has been recognised that only whole system approach can draw a road map to address economic inequalities and health outcomes.

There exist stark inequalities in health between women, which are related to socio-economic status, ethnicity and geographic region. Across different stages of women’s lives there are different social and economic factors which greatly influence health and associated health inequalities. These include experiences during early childhood, education, family building and working life and through retirement and into older age.

To address issues in health inequalities, EBCOG Council approved the working group on Health inequalities in November 2020. The objective is to review existing data, highlight them and make recommendation and ascertain what actions are required to meet high standards of care. The working group at present is in the process of analysing data collected from various countries in relation of provision of and delivery of care in various areas of women’s health. The success of this endeavour will have an added value in terms of the fight against health inequalities and enhancing women’s health and safety of care in Europe

Streamlining Training and Education – Safety and quality of care as the primary driver

The European Board of Obstetrics and Gynaecology (EBCOG) has been in the forefront of improving standards of care for women and their babies in Europe and beyond by streamlining standards of training in obstetrics and gynaecology. This has been achieved through hospital accreditation for training, introduction of Pan-European training curriculum, logbook and introduction of the Fellowship exam (EFOG). Europe with its diversity poses a significant challenge in the delivery of training in obstetrics and gynaecology. Whilst there is free movement of specialists across the borders it should be remembered there is free movement of patients with their varying health need as well.

EBCOG is committed to define standards of training by defining level of competencies of certified specialists.

Defining core competencies of specialists across a wide geographical area with varied socio-demographic factors is a huge yet challenging task. The Project for Achieving Consensus in Training (PACT) of EBCOG has been able to define core competencies to deliver safe care to be acquired by all and elective competencies as optional within the main curriculum⁵.

Notwithstanding some competencies may be easy to achieve in some countries, stratification of such competencies will help teaching programs across Europe to customize the new curriculum to the needs of their individual nation. EBCOG is committed to implement “The PACT” to ensure that all specialists within Europe are meeting the highest standards of training to deliver high quality care for women wherever it is accessed. .

Working with other stakeholders – reduce unmet need of contraception and reduce maternal mortality

Unmet need for family planning points to the gap between women's reproductive desire to avoid pregnancy and contraceptive behaviour. Numbers of unwanted pregnancies and high abortion rates in low- and middle-income countries are due to unmet needs of contraceptives especially low use of long-acting reversible contraceptives. But the recent pandemic with SARs Covid 19 virus has made it worse by highlighting the existing inequalities in the society. UNFPA is predicting up to 7 million unintended pregnancies worldwide because of the crisis, with potentially thousands of deaths from unsafe abortions and complicated births due to inadequate access to emergency care. Once again this is more likely to involve socially disadvantaged group of women. Natalia Kanem, Executive director of UNFPA, added that she was particularly concerned about “the skyrocketing of gender-based violence”, which she said was a “pandemic within a pandemic and it’s very much on my mind”.

EBCOG has been working very closely with UNFPA Eastern Europe and Central Asia Region (EECARO) since 2014 to support strategies to improve quality of care by transferring knowledge from west to east. This joint working arrangement has led to translation of EBCOG European Standards of Care in Russian language, organising masterclasses to develop evidence-based guidelines and protocols, organising travelling fellowships for experts from EECARO to visit centres of excellence in the west, publishing joint advocacy statements and capacity building in sexual and reproductive healthcare. EBCOG has also been working at country office levels to support local initiatives and to build capacity by training local leaders and clinicians.

EBCOG and ESCRH published their joint position statement in November 2019 to mark the 25th anniversary of ICPD 25 Nairobi⁶. Both have committed to work with UNFPA EECARO to address challenges in delivery of SRH services at the EECA region and capacity building particularly in Covid 19 sensitive environment, and to reduce maternal mortality, prevent unwanted pregnancies, improve adolescent health, reduce the burden of STIs, including HIV, safeguard and protect sexual health, and achieve gender equality to support the ICPD 25.

Building on what has been achieved so far EBCOG and ESCRH joint committee is now working on developing training and education programme for capacity building in SRH services to deliver ICPD 25. The planned introduction of a diploma, a bachelor and Fellowship examination within next two years will help to develop a workforce fit for purpose to provide comprehensive sexual and reproductive health services in Eastern

Europe and Central Asia by developing community-based networks. This will go a long way to reduce maternal mortality and improve safety of maternal and newborn care in that region⁷.

EBCOG fully support WHO's call for Safe maternal and newborn care on World Patient Safety Day. Over the years it has shown commitment towards high quality care by setting standards of care for women and neonates, introducing a core curriculum for safe practice, assessing training through examination and hospital visitation. It has worked with stakeholders to address the need to act now for safe and respectful childbirth by promoting knowledge transfer, advocating women's rights and supporting capacity building outside Europe. We are committed to work with UNFPA in Eastern Europe and Central Asia to deliver all the objectives as set out at ICPD 25.

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