Health inequalities are avoidable, unfair and systematic differences in health across population and different groups of people in the society. Differences in the way health care delivery across countries may have an impact on health outcomes and can result inequalities. Existing inequalities can adversely influence ethnicity, socio-economic deprivation, age, immigration status and lead to poor reproductive outcomes. The European Board & College of Obstetrics and Gynaecology (EBCOG) recognised issues around maternity care more than ten years ago, therefore published its standards of care for Obstetrics and neonatal care in 2014 which were launched at the European Parliament. These standards of care have provided guidance for the equitable access of antenatal care for all women within Europe. These standards of maternity care provide clear guidelines of what is currently considered generic and specific standards for antenatal care and screening facilities for low- and high-risk situations. Despite published standards of care inequalities still exist as is evidenced by the recently published scientific study on provision of antenatal care [1]. While antenatal care is relatively standardized throughout Europe, important differences still exist in care delivery and accessibility to care. Antenatal preventive strategies appear to be variably available throughout Europe.

Resolving the issue of inequalities is not easy, because healthcare is devolved within the European Union (EU). At EU level, there are various agencies, such as “European Centre for Disease Prevention and Control” and “European Foundation for the Improvement of Living and Working Conditions” as well as other stakeholders, who also seeks to challenge inequalities across European countries. The challenge is to bring together various organisations or institutions with their particular interests and stakeholder groups and to overcome the conflicting interests of different institutions.

It is evident that more needs to be done to reduce inequalities in antenatal care provision throughout Europe. EBCOG puts an emphasis on the public health aspect of antenatal care and calls on the all-stake holders to work together towards a shared common goal of reducing variation in care delivery. As a professional organisation representing over 32 countries, EBCOG calls for harmonisation of practices through teaching and training for appropriate risk assessments to make effective strategies of antenatal care across Europe.

Inequalities often get exposed when there is a pressure on the system, the Covid-19 pandemic provided an example of such, and the variation noted in response by various European nations is noteworthy. EBCOG recommends instituting further research on the effect of COVID 19 on...
Current economic crisis fuelled by high inflation will further exaggerate pressures on the health care systems and access to routine care during pregnancy when services are already struggling to provide emergency services. Regrettably, it will further marginalise the vulnerable groups of the society even to seek care at the time of need.

Maternity outcome indicators act as quality assessment tools for auditing antenatal care. Obtaining good quality data at country level and comparative data at European level is essential to assess quality of care and improving outcome. It is imperative that service providers work with Euro-Peristat, carry out regular audit of implementation of EBCOG standards of care and assess the impact of Covid 19 policies adopted by various countries.

Public health of antenatal care is well recognised, antenatal preventive strategies appear to be inconsistently available throughout the Europe. Despite geographic and economic factors, a standardised model of care delivery based on evidenced based standards is the need of the hour to reduce inequalities and improve health outcomes in pregnancy.

EBCOG is looking forward to work along with other organisations, FIGO, UNFPA, and WHO as enabler to implement changes at country and European level to reduce inequalities and improve pregnancy outcomes.

Approval

This review was peer reviewed by Professor Charles Ventura-Savona, Professor Basil Tarlatzis, Professor Diogo Ayres-de-Campos and Dr Hajra Khattak.

The paper was approved by the Executive Board of the EBCOG on 24th September 2022.

References