Letter



# Empowerment of Emergency Medical Services Workers in Physiologic Delivery Mass Religious Gatherings: The Neglected Educational Need

Tahereh Yaghoubi 🔟 <sup>1,\*</sup>, Marzieh Azizi 🔟 <sup>2</sup>

<sup>1</sup> Psychosomatic Research Center, Mazandaran University of Medical Sciences, Sari, Iran
<sup>2</sup> Sexual and Reproductive Health Research Center, Mazandaran University of Medical Sciences, Sari, Iran

\*Corresponding Author: Psychosomatic Research Center, Mazandaran University of Medical Sciences, Sari, Iran. Email: tyaghubi@gmail.com

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# Dear Editor,

Pregnancy and childbirth are among the most critical events in a woman's life (1). According to published statistics from Australia, most births (97%) occur in hospitals. Additionally, the latest statistics from this country showed that 1,237 births were performed by emergency medical services (EMS) workers (2, 3). Emergency medical services workers may include physicians, emergency medical technicians, and nurses, who provide multidimensional care to patients in emergencies (4). The unpredictable nature of childbirth may lead to unplanned births outside the hospital, which may pose risks for mothers and children (2).

Qualitative research findings aimed at explaining the experiences of pregnant women from unexpected and out-of-hospital childbirth showed that the most crucial concerns of pregnant women regarding delivery were a lack of respect for privacy, insufficient interpersonal communication skills, and lack of consent to perform specific procedures. Women had different attitudes towards the ability of EMS workers in childbirth skills. They expressed the need for confidence and trust in the care during delivery stages. Many women believe that delivery is a complicated process and that delivery agents must have high clinical ability and competence (5-7).

A systematic review and meta-analysis of women's physiological and psychological experiences of delivery and childbirth showed that the mother's self-confidence is essential for safe physiological delivery (8). To improve the confidence of pregnant women, EMS workers must have high clinical competence in safe physiological delivery. To reduce maternal deaths during pregnancy, the World Health Organization emphasizes that increasing the skills of emergency delivery by EMS workers in the South African region can prevent 98% of deaths during pregnancy (9, 10).

Emergency medical services workers are essential in communication between society and the health system. Their success in performing their professional duties requires specific abilities and skills. Considering the use of non-emergency medical fields in the job category of EMS workers, the professional competence of individuals must be emphasized in organizational tasks. A study in Iran prioritized practical childbirth skill training in the educational needs assessment of EMS workers (11). Appropriately managing this unpredictable situation requires a set of different disciplines and the emergency team's knowledge, skills, and close coordination (12).

Due to my educational experiences with faculty members of the Nursing and Midwifery school, I witnessed the employment of nursing graduates in EMS positions. One concern raised in recruiting male nurses in EMS is their inability to perform physiological delivery because, due to cultural challenges in Iran, male nursing students in the maternal newborn care unit are not allowed to be present in the labor ward and observe the delivery process. To create a feeling of trust in pregnant women, birth attendants must have high confidence in their skills and ability to manage delivery. Lack of proficiency in the required skills for physiological delivery can lead to mother-infant consequences during the delivery process.

The authors suggest the following items to increase the capability and professional competence of EMS workers in physiological delivery and reduce deliveryrelated consequences in pregnant women:

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(1) Designing virtual training content on physiologic birth.

(2) Setting up a training unit for maternal and newborn health in the labor ward.

(3) Emphasizing practical training on physiologic birth in the clinical skills laboratory using advanced childbirth moulages.

(4) Providing intermittent training courses on physiologic birth in the form of workshops for EMS workers.

(5) Using experts in the field of delivery (midwifery faculty members, experienced midwives) in planning training courses.

(6) Preparing educational videos on natural childbirth with emphasis on religious and cultural conditions and paying attention to the role of EMS workers in childbirth.

(7) Establishing the presence of male nursing students to perform physiological delivery in the labor ward.

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# Footnotes

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