

## Nurturing Maternal and Child Health

*By Barbara Ruben*

Whether it's in Uzbekistan, Ukraine or the United States, health practitioners and parents alike have a common goal: happy and healthy babies. At the maternal and child health workshop, partners shared their successes and challenges in the areas of family planning, obstetrics and neonatology.

"People by and large have very similar aspirations for their children. It's common to the human species to look after its young," said Edward H. Karotkin, MD, a neonatology professor at the Eastern Virginia Medical School in Norfolk, VA.

The partnership between Second State Medical Institute in Tashkent, Uzbekistan and the University of Illinois Hospital in Chicago, IL has made great strides in neonatology and obstetrics since it began in 1992, said Christine McCulloch, MD, assistant professor and neonatologist at the University of Illinois. To bolster education, Chicago partners helped Second State institute biweekly neonatal conferences, weekly conferences with obstetricians and a neonatal resuscitation training program. In addition, the partners provide scientific journals, books and other educational materials.

Both McCulloch and Alla Pogorelova, MD, director of the Department of Ob/Gyn and Perinatology at Second State, noted the difficulty in gathering data to assess the success of the partnership because of differences in Uzbekistan standards and those established by the World Health Organization and because of lack of monitoring equipment. However, Pogorelova said that infant mortality has been reduced from 70 per 1,000 in 1992 to 26 today. The perinatal death rate has decreased by 15 percent. Hospital stays for delivery have been cut by four days, due in part to improved neonatal care and education of mothers. And 35 percent of women using the hospital have now begun to use contraception as a result of education programs.

"At first, it's difficult to reduce problems because the difficult climate, poor ecology and lifestyle are all factors that affect pregnant women," Pogorelova said. "But with large-scale education we've had very good results. You can't underestimate the exchange of experience and knowledge through the partnership."

The Kyiv-Philadelphia partnership also reported the value of sharing information. "We learned that as midwives, we had the same philosophy and beliefs, that not a lot of technology is needed to support women through the process of birth. The belief that birth is normal and not something mysterious to be hidden away is very strong among all of us," said Vivian Lowenstein, a nurse-midwife at the Hospital of the University of Pennsylvania.

Because of work with the partnership, Obstetrical Hospital No. 2 in Kyiv now allows fathers to be present at birth and families can visit after birth, both of which were prohibited until a few years ago. Improved infection control methods and a prenatal education program started by midwives have shortened postpartum hospital stays, Lowenstein said.

Similar education efforts at Savior's Hospital in Moscow have taught more than 16,000 women about family planning and child birth. In partnership with the Magee-Women's Hospital in Pittsburgh, PA, a 1,500-page manual on the operation of maternity centers in Russia has been produced. Replication of Savior's Woman and Family Education Center is planned at 24 sites by late 1996.

Through community outreach, the center counsels both women and their partners about sexually transmitted diseases, birth control, and prenatal care and newborn care. "Family

planning is the whole health of a woman and not just a tiny part of her," Tanya Kotys, director of international affairs at Magee-Women's Hospital, said of the program's philosophy.

"When a woman arrives [at the education center] her eyes are full of fear and terror. When she leaves her eyes are bright," said Anna Anokhina, a nurse clinician and coordinator of the center. "She is expecting delivery to be more of a celebration or holiday and is ready to make their baby a happy one."