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## Knowledge, opinions and expectations of the society about the midwifery profession

Toplumun ebelik mesleği ile ilgili bilgi, görüş ve beklentileri

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#### **ABSTRACT**

Aim: With this study, it is aimed to evaluate the knowledge, opinions and expectations of the society about the midwifery profession.

Methods: This descriptive and cross-sectional study was conducted in June-September 2021 with outpatients at a public hospital in a province in eastern Türkiye with patients receiving outpatient treatment from midwives from the hospital's polyclinics. It was completed with 389 individuals who agreed to participate in the study. It was analyzed with SPSS (ver: 23.0) program. Using descriptive statistical tests the number and frequency distribution of the descriptive characteristics of the individuals participating in the study and the mean, standard deviation, maximum and minimum values of age were calculated. The number and frequency distribution of the information, opinions, and expectations of society about the midwifery profession was determined.

Results: It was observed that 37.5% of the participants were male, 62.5% were female, and 63.8% were university graduates. 94.6% said "Midwifery is a respected profession." Yes to the statement, "Midwifery is a profession with a low status." 86.1% said no to the statement; "The duties of midwives and nurses are the same." It was observed that 49.4% answered yes and 50.6% answered no to the statement.

Conclusion: According to the results obtained from the study, it was determined that the majority of the participants knew the duties and responsibilities of midwives correctly. There is a need for studies that investigate the opinions and thoughts of individuals about the midwifery profession with a bigger audience.

Keywords: knowledge; midwifery; public health

#### ÖZ

Amaç: Bu çalışma ile toplumun ebelik mesleğine ilişkin bilgi, görüş ve beklentilerinin değerlendirilmesi amaçlanmaktadır.

Yöntem: Tanımlayıcı ve kesitsel tipte olan araştırma, Haziran-Eylül 2021 tarihlerinde Türkiye'nin doğusunda bir ilde bulunan Devlet Hastanesinde hastanenin polikliniklerinden ebelerden ayaktan tedavi alan hastalar ile gerçekleştirilmiştir. Çalışma, araştırmaya katılmayı kabul eden 389 birey ile tamamlandı. SPSS (ver:23.0) programıyla analiz edildi. Tanımlayıcı istatistiksel testler kullanılarak araştırmaya katılan bireylerin tanımlayıcı özelliklerinin sayı ve frekans dağılımları ile yaşlarının ortalama, standart sapma, maksimum ve minimum değerleri hesaplanmıştır. Toplumun ebelik mesleğine ilişkin bilgi, görüş ve beklentilerinin sayı ve frekans dağılımları belirlendi.

Bulgular: Katılımcıların % 37.5'i erkek, % 62.5'i kadın olduğu, %63.8'inin üniversite mezunu olduğu görülmüstür. %94.6'sı "Ebelik saygın bir meslektir." ifadesine evet, "Ebelik mesleği, statüsü düşük bir meslektir." ifadesine %86.1'i hayır şeklinde; "Ebeler ve hemşirelerin görevleri aynıdır." ifadesine %49.4'ü evet, %50.6'sı hayır şeklinde cevap verdiği görülmüştür.

Sonuçlar: Katılımcıların % 37.5'i erkek, % 62.5'i kadın olduğu, %63.8'inin üniversite mezunu olduğu görülmüştür. %94.6'sı "Ebelik saygın bir meslektir." ifadesine evet, "Ebelik mesleği, statüsü düşük bir meslektir." ifadesine %86.1'i hayır şeklinde; "Ebeler ve hemşirelerin görevleri aynıdır." ifadesine %49.4'ü evet, %50.6'sı hayır şeklinde cevap verdiği görülmüştür.

Anahtar kelimeler: bilgi; ebelik; toplum sağlığı

#### Introduction

Midwifery, one of the oldest professions in the world, plays a key role in individual and community health. It aims to provide lifelong health services to a woman and her family, starting from pregnancy, childbirth, postpartum period, and newborn health. According to the International Confederation of Midwives (ICM) (ICM, 2017), a midwife is a trusted and responsible professional who provides care for the woman during pregnancy, childbirth, and postpartum period, gives necessary advice, performs delivery under her own responsibility, provides care for the newborn and works in cooperation with the woman. The ICM also sees the midwife as a health professional with important responsibilities in health counseling and education, not only for the woman but also for the community and the family. This includes antenatal education and preparation for parenthood, sexual and reproductive health, and child care. According to the Ministry of

Health, a midwife is a professional who carries out maternal and child health services, provides prenatal, delivery, and postnatal services, gives birth, provides nutrition and vaccinations for children aged 0-6, provides health education to individuals, families, and society on family planning, personal hygiene rules, first aid, protection against infectious and social diseases and war, collects and evaluates birth and death statistical data, provides necessary cooperation with public institutions, is exemplary in humanitarian and moral behavior, and graduates from a school registered by the Ministry of Health (ICM, 2017).

In recent years, there have been many developments related to the midwifery profession. The World Health Organization (WHO) Board of Directors has designated 2020 as the "Year of the Midwife" (WHO, 2020). In addition, legal arrangements were made with the regulation issued in 2014 on the duties, powers, and responsibilities related to the midwifery

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profession in our country. Within the scope of this regulation, midwives; conduct and monitor sexual and reproductive health services, diagnose pregnancy, normal pregnancy follow-up and necessary examinations, identify risky situations in the early period, manage birth and postpartum processes; (determine deviations from normal, take emergency measures, performing the first care and examination of the newborn, performing emergency resuscitation when necessary, administering medications defined per the protocols regulated by the Ministry in emergency obstetric situations,) training and counseling services necessary to protect and improve maternal and infant health during pregnancy, birth and the postpartum period, family planning services, screening programs for women and newborns, 0-6 years old child care and development, infectious disease control programs and immunization services (Official Gazette, 2014).

In a study conducted with midwives, reports show that only 20.2% thought that the status of their profession was high, 82.5% thought that their profession was tiring, and 32.5% thought that the status of their profession would be better in the future (Yılmaz et al., 2014). In the study conducted by Beydağ and Arslan (2008), results show that 36.8% of the participants wanted to change their profession, and in the study of Yılmaz et al. (2014), 11% of the midwives stated that they thought of transferring to private hospitals and working there if appropriate conditions were created. These results show that midwifery students and midwives think that the status of the midwifery profession is low in society and that society does not recognize the authorities and responsibilities of midwives sufficiently.

With this study, it was thought that the determination of the community's view of the midwifery profession, which serves the community, and the community's knowledge, opinions, expectations about the midwifery profession, and their knowledge of which health services they will receive from midwives will contribute to the scientific literature. In this context, it is crucial to determine the knowledge and opinions of society about the midwifery profession.

## **Methods**

#### Study design and participants

This descriptive and cross-sectional study was conducted to examine the knowledge, opinions, and expectations of the community about the midwifery profession.

This study was conducted in June-September 2021 with outpatients at a public hospital in a province in eastern Türkiye. It was completed with 389 individuals who agreed to participate in the study. The universe consists of 37582 people. With the Statcalc feature of the Epiinfo 7.2.2.16 program, the sample size was reached to 389 (n=389) individuals with a 95% confidence interval, 50% incidence and 5% error level.

## Measures

Data collection forms were applied by the researcher to the individuals who agreed to participate in the study via Google Forms with a QR code. Before the QR code was read, the individuals were informed by the researcher about the purpose, method, scope, duration of the study, ethical issues, data collection forms, and content. It took 5 minutes to fill in the data collection forms.

# Personal information form

This form, in which descriptive characteristics were questioned by the researcher in line with the literature, consists of 10 questions about demographic characteristics (age,

gender, family type, educational status, employment status, social security, etc.) (Kurt et al., 2018; Yılmaz et al., 2014).

# Information and Opinion and Expectation Evaluation Form on Midwifery Profession Form

It consists of 32 questions (midwifery is a respected profession, midwives are reliable, midwives are responsible, midwives understand and empathize with the individual they care for, etc. 11 statements expressing opinions; midwives can diagnose pregnancy, midwives can provide care to women during pregnancy, etc. 20 statements including the duties and powers of midwives and one open-ended question about what the expectations from midwives are) developed by the researcher in line with the literature and prepared to evaluate the knowledge, opinions, and expectations of the society about the midwifery profession (Kurt et al., 2018; Yılmaz et al., 2014). **Data analysis** 

In the study, the data obtained from the questionnaire form were transferred to the computer environment

It was analyzed with SPSS (ver: 23.0) program. Using descriptive statistical tests on the data obtained from the Personal Information Form, the number and frequency distribution of the descriptive characteristics of the individuals participating in the study and the mean, standard deviation, maximum and minimum values of age were calculated. The number and frequency distribution of the information, opinions, and expectations of society about the midwifery profession was determined through the data obtained from the Information and Opinion and Expectation Evaluation Form on Midwifery Profession.

## Ethical principles of the study

Before starting the study, written approval was obtained from the Ethics Committee of Sivas Cumhuriyet University (Date: 15.01.2020 and Number: 2020-01/32) and the provincial health directorate of the hospital where the individuals received outpatient treatment. The study was conducted per the Declaration of Helsinki Principles on ethical rules.

## Results

The tables and findings of the descriptive study conducted to determine the knowledge, opinions, and expectations of society about the midwifery profession are given below.

Table 1 shows the descriptive characteristics of the individuals in the community who participated in the study. When Table 1 was examined, results showed that the individuals in the community who participated in the study were 28.39±8.10 (18-60) years old on average, 35.2% were in the age range of 18-23 years, 62.5% were female, 68.8% were university graduates, 62% were in nuclear family structure, 58.6% were not working, 55.3% were unemployed, 61.2% perceived their economic status as moderate, 60.9% had social security and 68.9% lived in the city center. Of the individuals in the community who participated in the study, 92.5% stated that midwives should work in hospitals (n=360), 84.6% in health homes (n=329), 77.1% in Family Health Centers (n=300), 65.6% in Community Health Centers (n=255) and 42.2% stated that they could work freelance. It was found that 22.9% of the individuals in the community who participated in the study had a familiar midwife in their immediate vicinity, while 77.1% did not have a familiar midwife in their immediate vicinity (Table 1).

Table 2 shows the distribution of the answers given by the individuals in the community participating in the study to the "Information, Opinion, and Expectation Evaluation Form

Table 1. Distribution of identifying characteristics of individuals in society (n=389)

| in society (n=369)                            |           |              |
|---|-----------|--------------|
| Variables                                     | n         | %            |
| <b>Age</b> [Avrg.±SD (min- max)]= [28.39±8.10 |           | -            |
| 18-23 years old                               | 137       | 35.2         |
| 24-29 years old                               | 136       | 35.0         |
| 30 years and older                            | 116       | 29.8         |
| Gender  |           |              |
| Male  | 146       | 37.5         |
| Female  | 243       | 62.5         |
| Education level                               |           |              |
| Literate                                      | 5         | 1.3          |
| Primary school                                | 9         | 2.3          |
| Middle school                                 | 27        | 6.9          |
| High school                                   | 81        | 20.8         |
| University                                    | 248       | 63.8         |
| Master's degree and above                     | 19        | 4.9          |
| Family structure                              | 0::       | 00.5         |
| Nuclear family                                | 241       | 62.0         |
| Extended family                               | 120<br>28 | 30.8<br>7.2  |
| Fragmented                                    | 28        | 1.2          |
| Employment status Working                     | 161       | 41.4         |
| Not working                                   | 228       | 41.4<br>58.6 |
| Profession                                    | 220       | 50.0         |
| Unemployed                                    | 215       | 55.3         |
| Civil servant                                 | ∠15<br>71 | 55.3<br>18.3 |
| Self-employment                               | 71        | 18.0         |
| Worker  | 33        | 8.4          |
|   | 55        | 5.→          |
| Perception level of economic status Good      | 106       | 27.2         |
| Average                                       | 238       | 61.2         |
| Bad   | 45        | 11.6         |
| Social security status                        | -         | -            |
| Yes   | 237       | 60.9         |
| No  | 152       | 39.1         |
| Current residence                             |           |              |
| City center                                   | 268       | 68.9         |
| County center                                 | 81        | 20.8         |
| Village                                       | 23        | 5.9          |
| Town  | 17        | 4.4          |
| Workplaces of midwives*                       |           |              |
| Hospitals                                     | 360       | 92.5         |
| Health house                                  | 329       | 84.6         |
| Family Health Center                          | 300       | 77.1         |
| Community Health Center                       | 255       | 65.6         |
| Can be self-employed                          | 164       | 42.2         |
| Any midwives available nearby?                |           |              |
| Yes   | 89        | 22.9         |
| No  | 300       | 77.1         |

<sup>\*</sup> more than one answer has been given to the same question.

on Midwifery Profession". When Table 2 is examined; regarding the opinions of the individuals in the society who participated in the research about midwives and the midwifery profession; 94.6% yes, 5.4% no to the statement "Midwifery is a respected profession", 94.3% yes, 5.7% no to the statement "Midwives are reliable"; "Midwives are responsible" 92.8% yes, 7.2% no; "Midwives understand and empathize with the individual they care for" 92.3% yes, 7.7% no; "Midwives can easily be consulted on health-related issues" 89.7% yes, 10.3% no; "Midwives have good communication", 91.3% yes,

8.7% no; "Midwifery is a profession with low status", 13.9% yes, 86.1% no; "Midwives have a high workload", 74.8% yes, 25.2% no; To the statement "Midwives and nurses have the same duties" 49.4% answered yes, 50.6% answered no; to the statement "Midwives are members of a professional group with four-year university degrees" 91.3% answered yes, 8.7% answered no.

Regarding the duties, authorities and responsibilities of midwives, 82.8% of the individuals in the society participating in the research said yes to the statement "Midwives can diagnose pregnancy" and 17.2% said no; 88.7% said yes to the statement "Midwives can provide care to women during pregnancy" and 11.3% said no; "Midwives can perform normal pregnancy follow-up and necessary examinations during pregnancy" 85.9% yes, 14.1% no; "Midwives can identify risky situations early in pregnancy" 84.8% yes, 15.2% no; "Midwives can provide education in pre-pregnancy period" 93.1% yes. 6.9% no; "Midwives can prepare parents for birth in the prepregnancy period" 92.5% yes, 7.5% no; "Midwives can give education about newborn care" 91% yes, 9% no; "Midwife can provide care to the woman at the time of birth" 91.8% yes, 8.2% no; "Midwife can provide care to the woman in the postpartum period" 89.5% yes, 10.5% no; "Midwives can perform the first care and examination of the newborn" 88.4% yes, 11.6% no; "Midwives can perform delivery under their own responsibility" 84.8% yes, 15.2% no; To the statement "Midwives can vaccinate children aged 0-6 years" 86.4% yes, 13.6% no; to the statement "Midwives can follow the development and nutrition of children aged 0-6 years" 86.4% yes, 13.6% no; to the statement "Midwives can give family planning education" 82.5% yes, 17.5% no; to the statement "Midwives can educate the family and society on issues related to personal hygiene rules" 74% yes, 26% no; To the statement "Midwives can educate the family and society on issues related to first aid" 76,1% yes, 23,9% no; to the statement "Midwives can educate the family and society on issues related to protection from infectious diseases" 66,6% yes, 33,4% no; To the statement "Midwives can provide education to the family and society on issues related to war" 37,3% answered yes, 62,7% answered no and to the statement "Midwives can collect and evaluate birth and death statistical data" 60,9% answered yes, 39,1% answered no.

"What is your expectation from midwives?" When asked to answer the question, it was seen that 38% of them had expectations such as having strong communication skills, having the ability to empathize, and being understanding and polite. The participants' statements were: "They should always approach patients and their relatives in a calm manner and be attentive, no matter how difficult the conditions they work in." "It should be done with understanding", "I want midwives to be calmer at the time of birth and to improve themselves in calming the mother. I would like them to give more information to mothers about birth control methods", "They should be understanding, kind and gentle... Many women around me complain that midwives are rude to them after birth, do not understand them, and do their job carelessly", "Our expectations from our midwives are that every mother should have a prenatal and birth "Midwives, especially those working in the service, need to improve themselves in the field of effective communication" were used.

Table 2. Distribution of the answers given by individuals in the society to the evaluation form on knowledge, opinions, and expectations about midwives and the midwifery profession (n=389)

|  | Yes |      | No  |      |
|--|-----|------|-----|------|
| Views on Midwives/Midwifery Profession   |     | %    | n   | %    |
| Midwifery is a respected profession  | 368 | 94.6 | 21  | 5.4  |
| Midwives are trustworthy   | 367 | 94.3 | 22  | 5.7  |
| Midwives are responsible   | 361 | 92.8 | 28  | 7.2  |
| Midwives understand and empathize with the individual they care for                                    | 359 | 92.3 | 30  | 7.7  |
| Midwives can easily be consulted on health-related issues  | 349 | 89.7 | 40  | 10.3 |
| Midwives have good communication   | 355 | 91.3 | 34  | 8.7  |
| Midwifery is a profession with low status  | 54  | 13.9 | 335 | 86.1 |
| The work intensity of midwives is high   | 291 | 74.8 | 98  | 25.2 |
| Midwives and nurses have the same duties   | 192 | 49.4 | 197 | 50.6 |
| Midwives are four-year university graduates and members of a professional professional group           | 355 | 91.3 | 34  | 8.7  |
| Duties, authorities and responsibilities of midwives   |     |      |     |      |
| Midwives can diagnose pregnancy  | 322 | 82.8 | 67  | 17.2 |
| Midwives can provide care to women during pregnancy  | 345 | 88.7 | 44  | 11.3 |
| Midwives can perform normal pregnancy follow-up and necessary examinations during pregnancy            | 334 | 85.9 | 55  | 14.1 |
| Midwives can identify risky situations early in pregnancy  | 330 | 84.8 | 59  | 15.2 |
| Midwives can provide education in the pre-pregnancy period   | 362 | 93.1 | 27  | 6.9  |
| Midwives can prepare parents for birth in the pre-pregnancy period                                     | 360 | 92.5 | 29  | 7.5  |
| Midwives can give education about newborn care   | 354 | 91.0 | 35  | 9.0  |
| Midwives can provide care to the woman at the time of birth  | 357 | 91.8 | 32  | 8.2  |
| Midwives can provide care for women in the postpartum period   | 348 | 89.5 | 41  | 10.5 |
| Midwives can do the first care and examination of the newborn  | 344 | 88.4 | 45  | 11.6 |
| Midwives can give birth under their own responsibility   | 330 | 84.8 | 59  | 15.2 |
| Midwives can vaccinate children aged 0-6 years   | 336 | 86.4 | 53  | 13.6 |
| Midwives can follow the development and nutrition of children aged 0-6 years                           | 336 | 86.4 | 53  | 13.6 |
| Midwives can give family planning education  | 321 | 82.5 | 68  | 17.5 |
| Midwives can educate the family and society on issues related to personal hygiene rules                | 288 | 74.0 | 101 | 26.0 |
| Midwives can educate the family and the community on issues related to first aid                       | 296 | 76.1 | 93  | 23.9 |
| Midwives can educate the family and community on issues related to protection from infectious diseases | 259 | 66.6 | 130 | 33.4 |
| Midwives can educate the family and community on issues related to war                                 | 145 | 37.3 | 244 | 62.7 |
| Midwives can collect and evaluate birth and death statistical data                                     | 237 | 60.9 | 152 | 39.1 |

#### **Discussion**

Considering the findings obtained from the study, almost 80% of the participants are aware of the duties, authorities, and responsibilities of midwives. This result is quite pleasing. Koç et al. (2011) also reported that student midwives thought that "there is no difference in duties between midwives and nurses". In our study, almost half of the participants thought that the duties of midwives and nurses were the same. We think that uncertainties about duties, responsibilities, and employment affect the opinions of individuals outside the profession.

In studies conducted with midwifery students, students expressed that the social image and status of the midwifery profession are low (Karaoğlu et al., 2007; Koç et al., 2010; Pınar et al., 2013; Yücel et al., 2017), it is a despised profession (Dinç & Göktaş, 2011), society has negative judgments about the profession, midwifery is not seen as a profession (Yurtsal et al., 2014), that it is not necessary to receive education for the midwifery profession (Karaçam & Güleç, 2016), and that they viewed the midwifery profession negatively before starting school (59%) (Pınar et al., 2013). Yurtsal et al. (2014) also stated that some student midwives thought that "midwifery is not seen as a profession". In Karaçam and Güleç's (2016) study, it was determined that newly graduated and student midwives identified themselves as nurses with the idea that "nursing is a more respected profession in society". In our study, 94.6% thought that midwifery was a respected profession, 86.1% did not consider the status of the midwifery profession low, and 94.3% found

midwives reliable. It is noteworthy that the results have changed over the years. We think that this is because the visibility and activities of the midwifery profession have increased over the years. In the study of Karahan et al. (2011), it was reported that women (88%) defined the midwife as "the person who gives birth", and in the study of Okumuş et al. (2011), midwifery students (73%) defined the midwifery profession as the person responsible for normal births and newborns. In our study, more than 80% of participated in providing education, care and counseling, family planning education and care during pregnancy, birth, and newborn period, while participating in the duties and responsibilities related to personal hygiene rules, first aid, protection from infectious diseases, war, birth and death statistics gradually decreased.

To examine public awareness of the role and competence of midwives, a quantitative survey was conducted using the validated Midwifery Profiling Questionnaire, designed by a Belgian midwife research team and adapted to Slovenian conditions. When the main results were stated, it was emphasized that the participants were not aware of all the areas where midwives could work (Mivšek & Vermeulen, 2023). In our study, while more than 80% participation was achieved in providing education, care and counseling, family planning training and care in the pregnancy period, birth moment, newborn period, duties and responsibilities related to personal hygiene rules, first aid, protection from infectious diseases, war, birth and death statistics. participation has been declining. In a study by Kurt (2018), only 34% of

midwives thought that society respected and valued their work sufficiently, while in another study, this rate was 5% (Yılmaz et al., 2014).

In a study conducted in public hospitals in Istanbul, 13% of midwives thought that their profession was among the most trusted professions in society (Yılmaz et al., 2014). In a study conducted in public hospitals in İstanbul, the rate of midwives who thought that their profession was among the most trusted professions in society was found to be 13% (Yılmaz et al., 2014). In our study, 94.6% of the participants found the midwifery profession respectable, and 94.3% found it reliable.

"What is your expectation from midwives?" When asked to answer the question, it was seen that they had expectations such as having strong communication skills, empathy skills, and being understanding and polite. In the study conducted by Çalım et al. (2018) on pregnant women, in line with our study, pregnant women were among the midwives who attended the birth; to empathize, be friendly and behave well; It has been found that he is expected not to be irritable, rude and indifferent at birth.

## The limitations of the study

This research was carried out with a similar sample group. Therefore, the study findings can only be generalized to this group. This situation constitutes the limitation of our research.

#### Conclusion

According to the results obtained from the study, it was determined that the majority of the participants knew the duties and responsibilities of midwives correctly. The influence of midwifery students and midwives in the field on the recognition of the midwifery profession by society cannot be denied. In this respect, we think that making joint decisions under the professional organization in the recognition of the profession and solving the problems related to the field by being aware of the issues related to it, both midwife academics and midwifery students and midwives in the field will be successful as a result of their joint work. There is a need for studies that investigate the opinions and thoughts of individuals about the midwifery profession with a bigger audience.

# **Conflict of Interest**

There is no conflict of interest.

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The authors received no specific funding for this work.

## **Ethics Committee Approval**

Ethical approval for this study was obtained to Ethical Committee of Sivas Cumhuriyet University (Date: 15.01.2020 and Number: 2020-01/32).

## **Informed Consent**

Participation in this survey was anonymous, consensual and voluntary with informed consent provided by all respondents.

#### Peer-Review

Externally peer-reviewed.

#### **Author Contributions**

B.C.: Literature Search, Design, Supervision, Critical Review, Concept, Writing Manuscript, Materials, Data Collection and Processing, Analysis and/or Interpretation

Z.B.Y.: Literature Search, Design, Supervision, Critical Review, Concept, Writing Manuscript, Materials, Data Collection and Processing

M.A.B.: Literature Search, Design, Supervision, Critical Review, Concept, Writing Manuscript, Materials, Data Collection and Processing

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