

# Analysis of the Midwifery Profession According to the Fields of Philosophy: Qualitative Study

## Felsefenin Temel Alanlarına Göre Ebelik Mesleğinin Analizi: Nitel Çalışma

Nilay ŞENER ÖZOVALI<sup>1</sup>



<sup>1</sup>Bahçelievler District Health Directorate, Istanbul, Türkiye

Fatma Şule TANRIVERDİ<sup>2</sup>



<sup>2</sup>Halic University, Faculty of Health Sciences, Department of Midwifery, Istanbul, Türkiye

Nurten KAYA<sup>3</sup>



<sup>3</sup>Istanbul University-Cerrahpaşa, Health Sciences Faculty, Department of Midwifery, Istanbul, Türkiye



### ABSTRACT

**Objective:** Philosophy contributes to the formation of new strategies by affecting the development of questioning ability. Philosophy should be utilized to question the current situation and develop new strategies in midwifery. The study analyzes the midwifery profession according to the fields of philosophy, ontology, epistemology, and axiology.

**Methods:** The qualitative type of research is conducted between May 20, 2021, and August 30, 2021. The research is carried out with 12 participants who were selected by the maximum diversity sampling technique. The data are collected face-to-face with the participant information form and the semi-structured interview form. The data recorded during the interview is evaluated thematically through content analysis.

**Results:** In the research, three themes are identified: professional health discipline from an ontological point of view; development of midwifery knowledge and practices from an epistemological point of view; and professional and individual values from an axiological point of view.

**Conclusion:** In this study, it is stated that the midwifery profession is essential and sacred, that it should have professional knowledge and updated literature, and that women should be with them every period since birth.

**Keywords:** Midwifery philosophy, axiology, ontology, epistemology, national midwifery philosophy

### ÖZ

**Amaç:** Felsefe, sorgulama yeteneğinin gelişmesine etki ederek yeni stratejilerin oluşmasına katkı sağlar. Ebelikte mevcut durumu sorgulamak ve yeni stratejiler geliştirmek için felsefe yararlanılmalıdır. Çalışma ebelik mesleğini felsefe, ontoloji, epistemoloji ve aksiyoloji alanlarına göre analiz etmektedir.

**Yöntemler:** Nitel türdeki bu araştırma 20 Mayıs 2021 ile 30 Ağustos 2021 tarihleri arasında gerçekleştirildi. Araştırmaya, maksimum çeşitlilik örnekleme tekniği ile seçilen 12 katılımcı dahil edildi. Veriler, katılımcı bilgi formu ve yarı yapılandırılmış görüşme formu ile yüz yüze toplandı. Görüşme sırasında kaydedilen veriler tematik olarak içerik analizi yapılarak değerlendirildi

**Bulgular:** Araştırmada ontolojik açıdan profesyonel sağlık disiplini, epistemolojik açıdan ebelik bilgi ve uygulamalarının geliştirilmesi ve aksiyolojik açıdan mesleki ve bireysel değerler olmak üzere üç tema belirlendi.

**Sonuç:** Bu çalışmada ebelik mesleğinin çok gerekli ve kutsal olduğu, mesleki bilgi birikimi ve güncellenen bir literatüre sahip olması gerektiği ve kadınların doğumundan itibaren her döneminde yanında olarak mahremiyet ve haklarını gözetmeleri ve ebelerin mesleki değerlere sahip olması gerektiği bulundu.

**Anahtar Kelimeler:** Ebelik felsefesi, aksiyoloji, ontoloji, epistemoloji, ulusal ebelik felsefesi

Geliş Tarihi/Received 25.01.2024  
Kabul Tarihi/Accepted 10.09.2024  
Yayın Tarihi/Publication Date 09.10.2024

Sorumlu Yazar/Corresponding author:

Nilay ŞENER ÖZOVALI

E-mail: nilay.sener@hotmail.com

Cite this article: Şener Özvalı N., Tanrıverdi, F.Ş., Kaya, N. (2024). Analysis of the Midwifery Profession According to the Fields of Philosophy: Qualitative Study. *Journal of Midwifery and Health Sciences*, 7(3), 458-467.



Content of this journal is licensed under a Creative Commons Attribution-Noncommercial 4.0 International License.

## Introduction

Philosophy is the thought process that fills the space between faith and science. At the same time, it contributes to the formation of new strategies by affecting the development of questioning ability. In philosophy, it is crucial in the science of midwifery with the feature of being a discipline that helps to question the concepts specific to the midwifery profession, attach meaning to the concept, and bring these concepts to science. Thus, midwifery will be able to become a profession based on philosophy, research, and practice that combines science and art based on scientific and ethical values (Carolan & Hodnett, 2007; Bradfield et al., 2019).

Adopting a professional philosophy of midwives and systematizing it will help them clarify the point and direction they will focus on. In this way, attitude, belief, behavior, and language unity will be achieved among the members of the profession (Demirbaş-Meydan and Kaya, 2018; Kaya, 2022). The philosophy of midwifery provides care to midwives with a holistic perspective and services according to individual needs in this context. As a result of a study conducted focusing on two phenomenologies epistemological and ontological in midwifery philosophy, it was emphasized that ontology and epistemology should be used in the formation of midwifery philosophy (Miles et al., 2013).

Midwives are members of the healthcare team who have the closest relationship with women and their families from all walks of life. In this context, the professional philosophy should be focused on meeting women-centered, holistic, and individual care needs. The main theme of the professional philosophy determined by The International Confederation of Midwives (ICM) is "woman" and women are at the center of midwifery practices (ICM, 2020). The presence of a midwife who provides support, encouragement, and guidance to the physical, psychological, and social dimensions of women is vital for women (Carolan & Hodnett, 2007; Kaya, 2022).

Focusing on questions about the existence of the midwifery profession (ontology) and the source of knowledge (epistemology) forms the basis of scientific knowledge of midwifery. The development of midwifery practices will be made possible by identifying, exploring, and explaining real questions about ontology and epistemology (Walsh & Evans, 2014). The main goal of the midwifery philosophy should be to train midwives with a holistic and moral understanding who support evidence-based practice approaches and assume the responsibility of natural birth. Additionally, midwives should adopt woman-centered care that respects cultural values, beliefs, expectations, and

lifestyles (Cesur & Karakoç, 2020).

Considering the midwifery philosophy of ICM, the midwifery profession is beneficial to society; it is thought to be related to the training that midwives receive and to the qualities of compassion, compassion, reliability, and sensitivity of the members of the profession. In this case, it will be helpful to analyze the midwifery profession according to axiology, another area of philosophy. The philosophy of midwifery care according to ICM:

"I. Pregnancy and childbirth are usually normal physiological processes.

II. Pregnancy and childbirth is a profound experience that has an essential meaning for the woman, the woman's family, and society.

III. Midwives are the most suitable caregivers for women who give birth.

IV. Midwifery care develops, protects, and supports women's human, reproductive, and sexual health and rights, considering ethnic and cultural differences. Midwifery care is based on the ethical principles of justice, equality, and respect for human dignity.

V. Midwifery care is holistic and continuous, based on understanding women's social, emotional, cultural, spiritual, psychological, and physical experiences.

VI. Midwifery care protects and improves women's health and social status, freeing them and building self-confidence in their ability to cope with childbirth.

VII. Midwifery care is carried out in cooperation with women, taking into account that the woman has the right to self-determination. In addition, midwifery care is respectful to women, individualized, continuous, and not authoritarian.

VIII. The ethical and legal framework of midwifery care is shaped by formal and continuing education, scientific research, and evidence-based practices."

Articles I, II, and III of the ICM's philosophy of midwifery care are shaped by ontology. Articles V, VI, and VIII epistemology and articles IV and VII are also shaped by using the questions developed specifically for the field of axiology philosophy. However, the fact that some items are related to more than one field (e.g., Article VIII may be the inference of both epistemology and axiology questions) is a natural consequence of the principle that philosophy cannot be constrained. The current study aims to analyze the midwifery profession from a national perspective with the questions created using philosophy's ontology,

epistemology, and axiology fields. In addition, qualitative methodologies in midwifery research have increased significantly over the past two decades (Miles ve ark 2013). When examining studies related to the philosophy of midwifery in the national literature; In their study, Sönmez and Apay (2023) stated that the philosophy of woman-centered care has been practiced globally for a long time, but it has only recently come to the forefront in our country. They also suggested that in order to promote this philosophy, it should be integrated into all practices starting with midwifery education. In a qualitative study evaluating birth experiences within the scope of respectful maternity care, it was found that women had negative experiences regarding care and communication. The study emphasized that making birth services more woman-centered and respectful could contribute to supporting positive birth experiences for women (Reyhan and Dağlı, 2023). Taking into consideration the difficulty of the aim of the study and the fact that it is a subject that cannot be examined with numerical data, this study was carried out qualitatively.

### Methods

**Study design:** The current study aims to analyze the midwifery profession from a national perspective with the questions created using philosophy's ontology, epistemology, and axiology fields. This study was conducted between May 20, 2021, and August 30, 2021, in Istanbul with a qualitative design to analyze the midwifery profession according to the questions created based on ontology, epistemology, and axiology, which are the fields of philosophy.

**Population and Sample Size of the Study:** The study used the maximum diversity sampling method from the purposeful sampling methods to determine the individuals to be sampled. Purposeful sampling is a sample selection method that is especially preferred in qualitative research, which makes it possible to obtain rich content information appropriate to the purpose of the study (Sandelowski, 2000; Elo and Kyngas, 2008). Sample size varies according to the qualitative research approach, the variety of the selected sample, and the participant's ability to provide sufficient information. Participants were selected using a simple random sampling method from among those employed or enrolled at various institutions where the researchers were working, to ensure maximum diversity and richness of information in line with the study's objectives. For the selection of students, a simple random sampling method was employed by a faculty member at the institution. In this context, student midwives (one student from the first and fourth year), midwives working in the clinical field (one midwife working in the maternity ward and family health

center), midwives in the academic field (a faculty member and research assistant who have completed all stages of education in midwifery), individuals in need of midwifery care (a woman of childbearing age who has not previously received midwifery services) and their relatives (a woman of childbearing age who has not previously received midwifery services), individuals receiving midwifery care (a woman receiving midwifery services at the time the data was collected) and their relatives (a female spouse receiving midwifery services at the time the data was collected), randomly selected individuals from the society (two women who do not need midwifery care at childbearing age who are brides and daughters) were included in the research and were divided into two as midwifery and social side. The number of participants was completed with 12 individuals, 6 of whom were candidates and members of the midwifery profession, and 6 of whom were individuals representing the community. The present study was conducted in accordance with the Declaration of Helsinki.

**Data Collection Tools:** As a data collection tool, five questions, including demographic characteristics (age, gender, education status, occupation) and from the literature (Shepherd,2017; Bradfield et al., 2019), a questionnaire containing ten semi-structured questions (Table 1) prepared in line with the information obtained was used.

<b>Ontology</b>	Do you think midwifery should be a profession? What is midwifery? Who can be a midwife? Should midwives be featured in the media (television programs/social platforms) on health-related issues?
<b>Epistemology</b>	What does the midwife do? What is midwifery knowledge? Do midwives update their information? Do midwives do research? Is training necessary to be able to do the midwifery profession, and at what level should this education be?
<b>Axiology</b>	How should midwives treat the individuals/relatives they serve? How should the midwife behave when she makes a professional mistake?

**Data Collection Method:** The data were collected by individual in-depth interview methods using a semi-structured interview form. In semi-structured interviews, participants and researchers may deviate from the list of topics and ask questions as needed. The interviews were held at the appropriate time for each participant and in the

form of one-on-one interviews on the online platform. Attention was paid to the fact that the interview structure was informal and conversational, allowing each member to speak and including flexibility that would make it easier for the participants to express their feelings, thoughts, and experiences. Each participant was informed that audio and video would be recorded before the interview, and voluntary consent was obtained. The interviews were recorded in audio and video at the volunteer's request. The interviews were written down verbatim using a computer program and analyzed. The duration of each interview lasted approximately 60-90 minutes. To enhance the validity and reliability of the research, documents containing participants' responses were sent back to the participants for verification and correction of any misunderstandings. This process ensures that the responses are accurately and completely recorded and allows for the correction of any potential misunderstandings.

**Data analysis:** The descriptive data obtained from the questionnaire forms were reported numerically. The participants' voice recordings were converted into text to analyze the data. The data obtained from the interview were analyzed through content analysis. Content analysis requires an in-depth analysis of the collected data and allows for uncovering previously unclear themes and dimensions. The basic process of content analysis is to combine similar data within the framework of specific concepts and themes and interpret them by arranging them in a format the reader can understand. After the one-on-one interviews were over, the audio recordings were listened to repeatedly by the researchers and transferred to the computer environment, as the participants said. The written statements were read repeatedly, and the same, similar, and different expressions were grouped. The grouped expressions were re-evaluated within themselves, and the most repeated expressions and the main themes and sub-themes of the research were determined. Integrity was ensured by checking the relationship of the sub-themes that make up the themes among themselves and the relationship of each theme with the others. All of the findings were given directly without comment to ensure the research's internal reliability (consistency). The interview data, findings, and discussion section indicated that it was in quotation marks and italic font. All stages of the research adhered to the guidelines outlined in the Standards for Reporting Qualitative Research (SRQR).

**Ethical Considerations:** This study was approved by Ethics Committee of Haliç University Non-Interventional Clinical Research Ethics Committee (date and number:27.05.2021 No: 108).

## Results

The socio-demographic characteristics of the interviewed individuals were shown in Table 2. To analyze the midwifery profession from a national perspective, when the in-depth interview texts containing the opinions of the participants related to the ontology, epistemology, and axiology fields of philosophy were examined, three themes were determined as "Professional Health Discipline" related to the ontology field of philosophy, "Development of Midwifery Knowledge and Practices" related to the field of epistemology and "Professional and Individual Values" related to the field of axiology. These main themes were created from the categories in Figure 1.

### Theme 1. Professional Health Discipline

This theme defines the midwifery profession from an ontological point of view. Participants stated that the midwifery profession requires experience, that midwives should be people with individual values, that it is one of the oldest professions, that it is considered sacred, those male midwives can also take part, and that it is a professional health discipline that stands by women and their families. Below are direct quotes from some of the participants:

...If there is a birth, if there is humanity, if there is reproduction, if there is the continuity of our generation, the midwifery profession must be absolute, not like a profession, but the midwife must exist there as a whole... I think it should be not only professional, but also with its knowledge, experience, self, and everything there (Msc Midwife).

.. In our country, only women can do midwifery, but in other countries, men can also do this profession. There are also birth coaches that I have been hearing about a lot lately, I think midwives and birth coaches cannot be put in the same category.(Male 1).

..The midwifery profession is one of the first professions in the world for me. Because life begins with birth, it is a must for him; midwifery must be. The reason was also that there were two most important events in the world where there were births because there was midwifery when there was nothing. One of them is birth, and the other is death. (Male 2)

...Some of the qualities sought in people to become midwives include being responsible, clean, careful, cold-blooded, conscious, patient, loving, and making the right decision... (Research assistant)

...The midwife takes care of the woman's health before birth, at the moment of birth and postpartum. She is a

supporter of women. Psychologically and physiologically, it prepares women for birth. Responsible for the health of the newborn... (Midwifery 4. Grade student)

<b>Table 2.</b>			
<b>Socio-Demographic Characteristics of the Participants</b>			
<b>Age</b>	<b>Gender</b>	<b>Education Status</b>	<b>Profession</b>
Participant 1 (First year midwifery student)			
20	Woman	In undergraduate education	Student
Participant 2 (Fourth year midwifery student)			
22	Woman	In undergraduate education	Student
Participant 3 (Midwife working in the delivery room)			
29	Woman	University graduated	Midwife
Participant 4 (Midwife working in the Family Health Center)			
39	Woman	University graduated	Midwife
Participant 5 (Faculty Member)			
35	Woman	University graduated	Academician
Participant 6 (Research assistant)			
30	Woman	University graduated	Academician
Participant 7 (A woman of childbearing age)			
36	Woman	Secondary graduate	Secretary
Participant 8 (A female partner of childbearing age)			
49	Man	University graduated	Journalist
Participant 9 (A woman who has not received midwifery services)			
24	Woman	University graduated	Housewife
Participant 10 (Spouse of a woman who has not received midwifery services)			
33	Man	University graduated	Engineer
Participant 11 (Woman of childbearing age who does not need midwifery care with a daughter-in-law and daughter)			
53	Woman	Secondary graduate	Housewife
Participant 12 (Woman of childbearing age who does not need midwifery care with a daughter-in-law and daughter)			
50	Woman	Secondary graduate	Housewife

..Midwives should definitely be featured on social media/media. Nowadays, in social media, obstetricians or health personnel from different branches do not have general comprehensive direct patient diagnoses but informative guiding determinations and shares.. (Male 2)

#### Theme 2. Development of Midwifery Knowledge and Practices

This theme includes epistemological definitions of the midwifery profession. In this context, "The structure of midwifery knowledge", "Ensuring the up-to-dateness of knowledge". 3 categories consisting of "thoughts on the reasons for doing research" were determined. Participants stated that the knowledge of midwifery is gained during the training, as well as experience, and that this knowledge and experience is transformed into art; every midwife should have this knowledge. The participants found it necessary for

midwives to access information, use technology actively, eliminate the lack of professional satisfaction, be encouraged and appreciated, and enable specialization. Below are direct quotes from some of the participants.

...The knowledge of midwifery is not a profession to be learned by reading directly from a book in school. The knowledge of midwifery develops by doing it as a dentist, gaining experience, and then turning it into an art. Because we know that the woman on the other side is not the same woman, the person in front of you is not a healthy person, the patient comes in that logic and begs for compassion from you... (Male 2)

.. I think the knowledge of midwifery is also fixed by experience, so you increase it by experiencing what is written in the book other than what you learn in school, enter into childbirth and thing happens after it happens, look at this is developing as I need to pay attention to this, you learn as you live a knowledge that is actually in the air what is transmitted to you and you make connections is definitely not without a theory... (MsC Midwife)

... They should update, so yes, they should update; maybe we may not be able to update it due to the location we are in... (Midwife)

... so we do not improve ourselves,... we can only turn to the subject of obstetrics and gynecology, but as I said, there is no enthusiasm to complete it... (MsC Midwife)

... I think she can update her knowledge to make her profession better for the health of mother and baby... because it improves itself in terms of its patients... you need to be professional... (Participant 7, Woman)

... they can contribute to science by doing research, they can improve themselves by doing research, they can keep themselves up to date... We need to know that this work is a science and takes place in a very serious human life...

Along with the foreign language of course it needs to be taken.... (Male 2)

... The midwife, which is a professional group that is so at the forefront of the health of society, needs to change and develop... (Faculty Member)

... and experience with its equipment... develops itself by making the right knowledge or additions on top of their knowledge with their experience... (Midwifery 1. Class student )

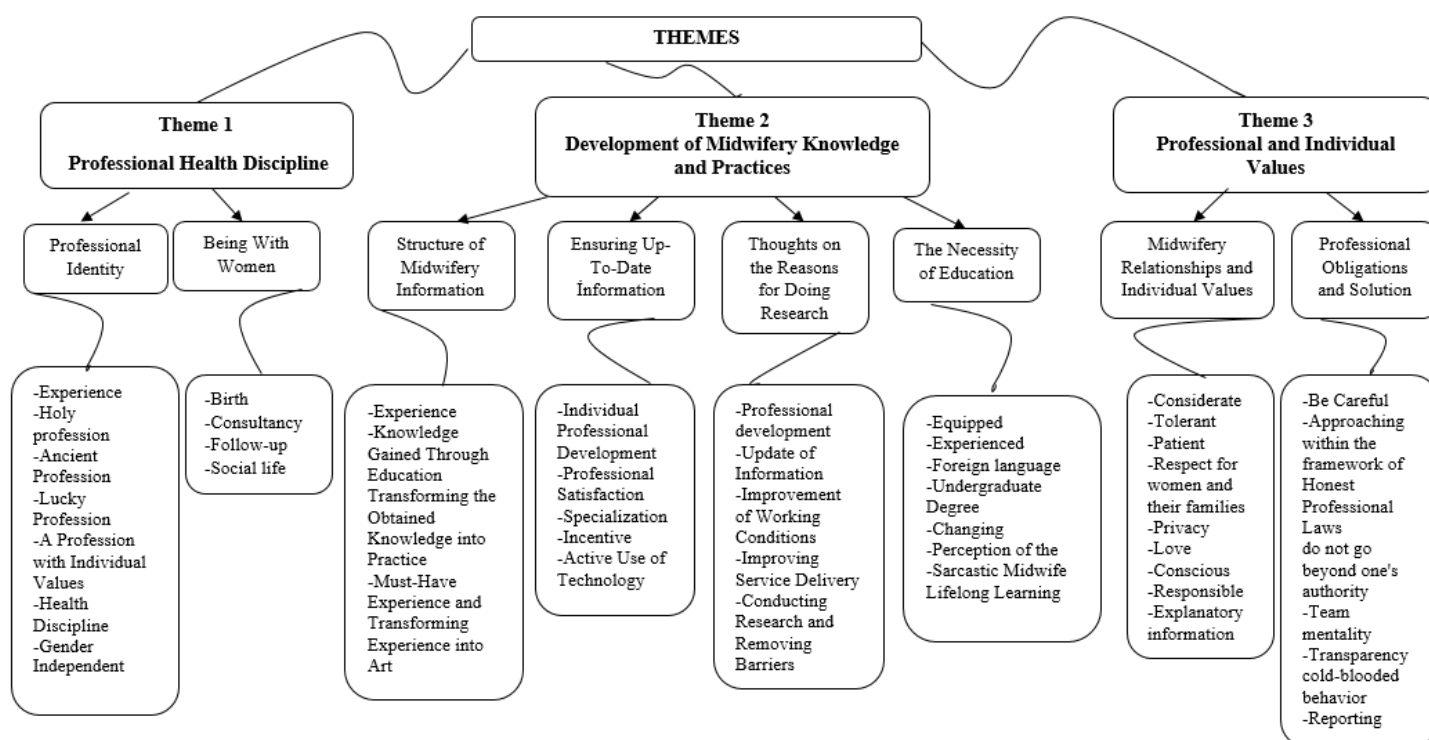


Figure 1. Main Themes

### Theme 3. Professional and Individual Values

The theme of professional and individual values defines the relationship of the philosophy of midwifery with the field of axiology. This theme consists of 2 categories. Most participants mentioned that midwives should have individual values when serving individuals and/or their relatives who need midwifery care and the importance of the professional responsibilities midwives should take in the face of error. Below are direct quotes from some of the participants.

..They should act coolly and professionally, explain the situation to the expectant mothers and their relatives, share it, and then talk to their doctor and find a solution to the problem... (Participant 7, Woman) ... should not stress it out, behave well, shout and shout. He should give all kinds of information to his relatives... He should learn from this mistake, apologize for the mistake he made, and be more careful. (Male 1)

... Certainly, if the inevitable thing of birth is privacy, you know that ethical privacy is inevitable basic concepts in birth, but these environmental conditions of ours are the reasons that are not caused by us, all of them leave one by one such a little thing as you want you can not manage the birth as you want... (MsC Midwife)

... I definitely believe that this relationship should be in professional way and a little bit far from sincerity

professional. Whether it is within the ethical rules of this midwifery profession, those people in the patient/client relationship should definitely contain respect for each other in this dialogue, of course... (Male 2)

... Within the framework of the laws on professional error.

(Faculty Member)

... The first one is definitely not to work without it; you will protect yourself in any way, he is not competent to act individually anyway about the applications, but if you have made a mistake, I will stand behind it.. (MsC Midwife)

... I think that when the error already occurs, it should be explained and corrected in an informative way on both sides... (Male 2)

... He should start from scratch by thinking that the individual on the other side is completely unsympathetic, completely ignorant, but ignorant of that subject..... if she is a midwife, she will be responsible and conscious... If he's making a mistake, then he's going to stop his potential growth... (Male 2)

### Discussion

According to the midwifery philosophy of the International Confederation of Midwives, it is expected to contribute to women's health development, protect their health, ensure their confidentiality, inform them about critical issues, and enable women to make their own decisions; further,

support reproduction and to be an advocate of normal births. While fulfilling these, it is stated that mother-baby health should be increased by respecting cultural and ethical values in mutual respect, trust, and responsibility sharing (ICM, 2020). This study was conducted qualitatively to discuss the midwifery profession in multiple ways to analyze the midwifery profession according to ontology, epistemology, and axiology, which are the fields of philosophy.

The midwifery profession, known since the existence of humanity, has been a profession that includes science, art, and ethical values by continuing its development in parallel with the scientific developments in health (Yıldırım, Koçkanat and Duran, 2014). The International Confederation of Midwives includes the first three items in the philosophy of midwifery care, covering the field of ontology (ICM, 2020). In this study, the participants stated that midwifery requires experience, is one of the oldest professions, and is considered sacred. This result was similar to the ontological considerations in ICM's philosophy of midwifery and the studies in the literature. Midwifery, which is one of the oldest professions in the world, is a profession based on etiquette and experience that was initially transferred from mother to daughter in Türkiye (Soğukpınar ve ark 2007). Still, today it requires at least a bachelor's level education (Korkut & Kaya, 2019).

In this study, the participants stated that the knowledge and experience of midwifery were gained during the training and that this knowledge and experience gained was transformed into art. Thus, it was important for every midwife to have this knowledge to access information, use technology actively, eliminate the lack of professional satisfaction, be encouraged and appreciated, and provide opportunities for specialization. To improve their knowledge and practice in midwifery, midwives are expected to base the development of their knowledge on the activities of the protection of women's rights, observe their colleagues, conduct research, and share them to improve their knowledge, contribute to the training of midwives (Foster and Jon, 2010; ICM, 2020). Philosophical questions developed through epistemology will contribute to a better understanding, analysis, and examination of midwifery. This accumulated knowledge will, in turn, contribute to the specialization of the midwifery profession (Kaya and Nuraliyeva, 2022). As a result, the data obtained from the answers to the questions developed using the epistemology field of philosophy are compatible with the national literature and international philosophy of midwifery. Although midwifery practices vary markedly among world midwives, they usually focus on the natural and routine aspects of pregnancy. From a midwife; ensuring equality in midwifery care, keeping the knowledge of every

professional member up-to-date and developing it, contributing to women's health development by respecting cultural and ethical values in mutual respect, trust, and responsibility sharing, protecting their health, ensuring their privacy and confidentiality, ensuring that women make their own decisions by informing them about the necessary issues, protecting women and those they care about (spouse, mother, father, child, etc.) and supporting reproduction, is expected to be an advocate of normal births (Durgun, Selma and Tayhan, 2018; Kurtoğlu Barol and Kaya, 2019; ICM, 2020). Additionally, "Midwifery: Knowledge, Skills and Practices" has been included in UNESCO's Intangible Cultural Heritage List. This inclusion will help preserve the midwifery profession and pass it on to future generations.

In a study conducted by Weston, it was revealed that the stories about the values told were effective in teaching the values to the midwifery students, adopting them, and accepting their new roles in the training (Weston, 2012). The American College of Nurse-Midwives (ACNM) philosophy emphasizes that midwives should receive the best care for women and their families while respecting human dignity and rights. Professional values of midwives develop by interacting with the education they receive, the care they give to individuals as a result of observing the care given by other working midwives, the cultural-professional socialization process, and the values of the society and the institution they work for (Yıldırım, Koçkanat and Duran, 2014). The guidance of midwifery practices by axiology will reveal the art aspect of the midwifery profession in addition to its scientific nature. Similar to the 3H (heart, head, hands) modeling method, midwives should approach their profession with an artistic perspective. The service provided by a midwife, blending an artistic perspective with the light of science, will become a source of light and healing for the entire society through the experience of one woman (Kaya and Nuraliyeva, 2022). In a phenomenological study of midwives, a "good midwife" is defined as a professional who loves his job, communicates well, has emotional intelligence, and can support people (Byrom & Downe, 2010). In this study, the participants stated that while serving the individual and/or their relatives who need midwifery care, their individual-professional values and in this context, they should be respectful, understanding, tolerant, patient, empathetic, helpful, conscious, responsible, calm, and loving. This result was in parallel with international and many national philosophies.

### Conclusion and Recommendations

This study was carried out to develop a national philosophy of midwifery by using the answers given to the questions

created by using the fields of philosophy, and the following inferences were obtained:

### Professional health discipline (Ontology)

- Midwifery is a sacred, ancient, and fortunate profession based on experience.

- As long as humanity exists, there will be birth and reproduction is part of natural selection. Midwives follow up at all stages, including fertilization preparation, fertilization, pregnancy, birth, and the postpartum period, provide consultancy and intervene with the parties' participation when necessary.

- Midwifery care is essential for women, newborns, children, the community, and reproductive health. The midwifery profession is not a profession that a single gender can perform, and members of the profession should be considered gender-independent.

- Midwifery is a professional group that has essential roles in the social life of society, especially among women.

### Development of midwifery knowledge and practices (Epistemology)

- The knowledge of midwifery is gained through experience and education, and knowledge needs to be transferred to practice.

- The midwife should have sufficient knowledge based on science and should be able to integrate this knowledge with art.

- Midwives should update their knowledge, specialize in their fields, be able to use technology and be encouraged in these matters actively.

- Midwives should participate in scientific studies to contribute to professional development and individual development, thus providing better quality services yet eliminating obstacles to conducting research.

- Midwives should be intellectual, experienced, fluent in foreign languages, have at least four years of university graduation, and adopt lifelong learning; society's perception of "mocking midwives" must be changed.

### Professional and individual values (Axiology)

- Midwives, in their relationships with the individual/s they serve, their colleagues, other health team members, groups, and the community. They respect human dignity and make understandable information. They are understanding, tolerant, patient, empathetic, helpful, conscious,

responsible, loving, and attentive to privacy.

- Midwives act carefully in all applications related to the field, are honest, comply with laws and regulations, do not go beyond their authority, work with team understanding, are transparent, act coolly when necessary, and report errors.

**Ethics Committee Approval:** This study was approved by Ethics Committee of Haliç University Non-Interventional Clinical Research Ethics Committee (date and number:27.05.2021 No: 108)

**Informed Consent:** Written and verbal informed consent was obtained from the volunteers participating in this study.

**Peer-review:** Externally peer-reviewed.

**Author Contributions:** Concept – N.K.; Design – N.Ş.Ö, F.Ş.T.,N.K.; Supervision – N.Ş.Ö, F.Ş.T.,N.K.; Resources – N.Ş.Ö, F.Ş.T.,N.K.; Materials – N.Ş.Ö, F.Ş.T.,N.K.; Data Collection and/or Processing – N.Ş.Ö, F.Ş.T.,N.K.; Analysis and/or Interpretation – N.Ş.Ö, F.Ş.T.,N.K.; Literature Search – N.Ş.Ö, F.Ş.T.,N.K.; Writing Manuscript – N.Ş.Ö, F.Ş.T.,N.K.; Critical Review – N.Ş.Ö, F.Ş.T.,N.K.

**Conflict of Interest:** The authors have no conflicts of interest to declare.

**Financial Disclosure:** The authors declared that this study has received no financial support.

**Etik Komite Onayı:** Araştırma öncesinde Haliç Üniversitesi Girişimsel Olmayan Klinik Araştırmalar Etik Kurulu'ndan izin alınmıştır (Etik Kurul Tarih: 27.05.2021 No: 108).

**Hasta Onamı:** Yazılı ve sözlü katılımcı onamı bu çalışmaya katılan gönüllülerden alınmıştır.

**Hakem Değerlendirmesi:** Dış bağımsız.

**Yazar Katkıları:** Konsept – N.K.; Tasarım – N.Ş.O., F.Ş.T., N.K., Denetim – N.Ş.O.,F.Ş.T., N.K. ; Kaynaklar – N.Ş.O., F.Ş.T., N.K.; Malzemeler – N.Ş.O., F.Ş.T.,N.K.; Veri Toplama ve/veya İşleme – N.Ş.O.; F.Ş.T.; Analiz ve/veya Yorum – N.Ş.O.; F.Ş.T.; N.K.; Literatür Taraması – N.Ş.O.; F.Ş.T., N.K.; Yazma – N.Ş.O.; F.Ş.T., N.K.; Eleştirel İnceleme – N.Ş.O., F.Ş.T., N.K

**Çıkar Çatışması:** Yazarlar, çıkar çatışması olmadığını beyan etmiştir.

**Finansal Destek:** Yazarlar, bu çalışma için finansal destek almadığını beyan etmiştir.

### References

- American College of Nurse- Midwives. Code of ethics with explanatory statements. <http://www.midwife.org/Strengthening-the-Midwifery-Profession> (Date of Access: 21.04.2023)
- Bradfield, Z, Kelly, M, Hauck, Y, Duggan, R. (2019). Midwives 'with woman'in the private obstetric model: Where divergent philosophies meet. *Women and Birth* 32(2):157-167. doi: 10.1016/j.wombi.2018.07.013.
- Byrom, S, Downe, S. (2010). 'She Sort of Shines': Midwives Accounts of 'Good' Midwifery and 'Good' Leadership. *Midwifery* 26(1):126-37. doi: 10.1016/j.midw.2008.01.011.
- Carolan, M, Hodnett, E. (2007) 'With woman' philosophy: examining the evidence, answering the questions. *Nursing Inquiry*, 14(2):140-152. doi: 10.1111/j.1440-1800.2007.00360.x.
- Cesur, B, Karakoç, S. (2020). The Effect of Philosophical Movement to Midwifery Education. In. Chernopolski PM,



- Shapekova NL, Ak B, Sançar B, eds. *Advances in Health Sciences Research*, Sofia, St. Kliment Ohridski University Press
- Demirbaş Meydan, Ş, Kaya, N. (2018). Development of the Midwifery Professional Values Scale. *Journal of Health Sciences and Professions*, 5(2):129-138. doi.org: 10.17681/hsp.350549
- Durgun, SK. Selma, Ş. Tayhan, E. (2018). National and international midwifery ethical codes. *Celal Bayar University Journal of Health Sciences Institute*, 5(4):127-223. chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/https://dergipark.org.tr/en/download/article-file/614510
- Elo, S. Kyngas, H. (2008). The qualitative content analysis process. *Journal of Advanced Nursing*, 62(1):107-115. doi: 10.1111/j.1365-2648.2007.04569.x.
- Foster Illysa, R. Jon Lasser. (2010). *Professional ethics in midwifery practice*. Jones & Bartlett Publishers; 2010.
- Göncü Serhatlıoğlu, S. Kaya, N. (2018). Ethical approach to adolescent pregnancies in midwifery services. *Journal of Health Sciences and Professions*, 5(3):503-508. doi: 10.17681/hsp.411926
- International Confederation of Midwives (ICM). *Philosophy and Model of Midwifery Care*. [https://internationalmidwives.org/assets/files/general-files/2020/07/cd0005\\_v201406\\_en\\_philosophy-and-model-of-midwifery-care.pdf](https://internationalmidwives.org/assets/files/general-files/2020/07/cd0005_v201406_en_philosophy-and-model-of-midwifery-care.pdf) (Date of Access: 21.04.2023)
- Kaya, N. (2022). *Ebelik Felsefesi [Midwifery Philosophy]*, İstanbul, Academy Press and Publishing: ISBN: 978-605-70825-3-4.
- Kaya, N, Nuraliyeva, Z. (2022). *Ebelik felsefesi*. Kaya, N. (Ed.) *Ebelik Felsefesi içinde 6. Bölüm*. İstanbul, Akademi Basın ve Yayıncılık.
- Korkut, S. Kaya, N. (2019). Ethical approach to the decision to give birth by caesarean section with midwife awareness. *Journal of Health Sciences and Professions*, 6(1):142-150. doi: 10.17681/hsp.442171
- Kurtoğlu Barol, Z. Kaya, N. (2019). Evaluation of defensive medicine practices in childbirth in terms of patient rights and midwifery ethical codes. *Journal of Health Sciences and Professions*, 6(3):610-620. doi: 10.5152/hsp.2019.523978
- Miles, M. Chapman, Y. Francis, K. Taylor B. (2013). Exploring Heideggerian hermeneutic phenomenology: A perfect fit for midwifery research. *Women and Birth*, 26(4):273-276. doi: 10.1016/j.wombi.2013.06.003.
- Reyhan, F. A., & Dağlı, E. (2023). Kadınların Saygılı Annelik Bakımı Doğrultusunda Doğum Deneyimlerinin Değerlendirilmesi: Nitel Bir Araştırma. *Sakarya Üniversitesi Holistik Sağlık Dergisi*, 6(1), 124-141.
- Sandelowski, M. (2000). Whatever happened to qualitative description? *Research in Nursing & Health*, 23(4):334-340. doi: 10.1002/1098-240x(200008)23:4<334::aid-nur9>3.0.co;2-g.
- Shepherd, J. (2017). Becoming an accountable midwife. *The Practising Midwife*, 20(6):20-23. PMID: 30462467
- Soğukpınar, N. Saydam, BK. Bozkurt, OD. Öztürk, H. Pelik, A. (2007). Past and present midwifery education in Turkey. *Midwifery*, 23(4):433-42. doi: 10.1016/j.midw.2007.01.011.
- Sönmez, T., & Apay, S. E. (2023). Doğum yönetiminde kadın merkezli bakım: Seçim, kontrol, süreklilik. *Anatolian Journal of Health Research*, 4(2), 72-75.
- Thompson, SM. Nieuwenhuijze, MJ. Low, LK. De Vries, R. (2019). "A powerful midwifery vision": Dutch student midwives' educational needs as advocates of physiological childbirth. *Women and Birth*, 32(6):e576-e583. doi: 10.1016/j.wombi.2018.12.010.
- UNESCO, (2023). Eighteenth session of the Intergovernmental Committee for the Safeguarding of the Intangible Cultural Heritage. <https://ich.unesco.org/en/RL/midwifery-knowledge-skills-and-practices-01968>
- Walsh, D. Evans, K. (2014). Critical realism: An important theoretical perspective for midwifery research. *Midwifery*, 30(1):e1-e6. doi: 10.1016/j.midw.2013.09.002.
- Weston, R. (2012). Telling stories, hearing stories: The value to midwifery students. *British Journal of Midwifery*, 20(1):41-9. doi: 10.12968/bjom.2012.20.1.41
- Yıldırım, G. Koçkanat, P. Duran, Ö. (2014). National midwifery codes and occupational values. *STED*, 23(4):148-154. <https://hdl.handle.net/20.500.12418/258>

### Genişletilmiş Özet

Felsefe, sorgulama yeteneğinin gelişmesine etki ederek yeni stratejilerin oluşmasına katkı sağlar. Aynı zamanda, kavramları ebelik mesleğine özgü sorgulamaya, kavrama anlam yüklemeye ve bu kavramları bilime kazandırmaya yardım eden bir disiplin olma özelliği ile ebelik biliminde önem taşımaktadır. Böylece ebelik, bilimsel ve etik değerler üzerine temellenen bilim ve sanatı birleştiren, felsefe, araştırma ve uygulamaya dayalı bir meslek haline gelebilecektir.

Ebelerin mesleki bir felsefeyi benimsemesi ve bunu sistematik hale getirmesi, odaklanacakları noktayı ve yönü netleştirmelerine yardım edecektir. Bu yol ile meslek üyeleri arasında tutum, inanç, davranış ve dil birliği sağlanabilecektir. Ebelik felsefesi, ebelere bütüncül bir bakış açısı ile bakım vermeyi ve bu kapsamda bireysel gereksinimlere göre hizmet sunmayı sağlamaktadır. Ebelik felsefesinde epistemolojik ve ontolojik olmak üzere iki fenomenoloji üzerinde durularak yapılan bir çalışmanın sonucunda ebelik felsefesini oluşturmada ontoloji ve epistemolojiden yararlanılması gerektiği konusuna vurgu yapılmıştır. The International Confederation of Midwives'ın ebelik felsefesi göz önüne alındığında; ebelik mesleğinin topluma faydalı olmasının; hem ebelerin aldıkları eğitimle hem de meslek üyelerinin merhamet, şefkat, güvenilirlik ve duyarlı olma özellikleri ile ilişkili olduğu düşünülmektedir. Bu durumda ebelik mesleğinin, felsefenin diğer bir alanı olan aksiyolojiye göre analiz edilmesi, yarar sağlayacaktır. Bu çalışma, felsefenin temel alanları olan ontoloji, epistemoloji ve aksiyolojiye göre ebelik mesleğini analiz etmek amacı ile nitel yöntem kullanılarak 20 Mayıs 2021- 30 Ağustos 2021 tarihleri arasında yapıldı. Araştırma, İstanbul ilinde ebelik mesleği hizmeti sunan ve hizmet alan olmak üzere iki kategori şeklinde ve maksimum çeşitlilik örnekleme tekniğiyle belirlenen 12 katılımcı ile gerçekleştirildi. Katılımcılar, öğrenci ebeler (birinci ve dördüncü sınıftan birer öğrenci), klinik alanda çalışan ebeler (doğumhane ve aile sağlığı merkezinde çalışan birer ebe), akademik alandaki ebeler (tüm öğrenim aşamalarını ebelikte tamamlamış bir öğretim üyesi ve araştırma görevlisi), ebelik bakımına gereksinim duyan bireyler (daha önce ebelik hizmeti almamış doğurganlık çağındaki bir kadın) ve yakınları (daha önce ebelik hizmeti almamış doğurganlık çağındaki bir kadın eşi), ebelik bakımı alan bireyler (veri toplandığı sırada ebelik hizmeti alan bir kadın) ve yakınları (veri toplandığı sırada ebelik hizmeti alan bir kadın eşi), toplumdan rastgele seçilen bireyler (doğurganlık çağındaki gelin ve kızı olan ebelik bakımına gereksinim duymayan iki kadın) araştırma kapsamına alınmıştır. Veriler katılımcı bilgi formu ve yarı yapılandırılmış görüşme formu ile yüz yüze toplandı. Görüşme sırasında kaydedilen veriler tematik olarak içerik analizi yapılarak değerlendirildi. Araştırmada, ebelik mesleğinin ulusal bakış açısı ile analiz edilmesi amacıyla, felsefenin ontoloji, epistemoloji ve aksiyoloji alanlarıyla ilgili katılımcıların görüşlerini içeren derinlemesine görüşme metinleri incelendiğinde, Felsefenin ontoloji alanına ilişkin "Profesyonel Sağlık Disiplini" epistemiyoloji alanına ilişkin "Ebelik Bilgi ve Uygulamalarının Geliştirilmesi" ve aksiyoloji alanıyla ilişkili "Mesleki ve Bireysel Değerler" şeklinde olmak üzere 3 tema belirlendi. "Profesyonel Sağlık Disiplini" teması ebelik mesleğini ontolojik yönden tanımlamaktadır. Katılımcılar ebelik mesleğinin tecrübe gerektirdiğini, ebelerin bireysel değerleri olan kişilerin olması gerektiğini, en eski mesleklerden biri olduğunu, kutsal sayıldığını, erkek ebelerin de yer alabileceğini, kadın ve ailesinin yanında olan bir profesyonel sağlık disiplini olduğunu ifade etti. "Ebelik Bilgi ve Uygulamalarının Geliştirilmesi" teması ebelik mesleğini epistemolojik yönden tanımlamaları içermektedir. Bu bağlamda "Ebelik bilgisinin yapısı", "Bilgi güncelliğinin sağlanması". "Araştırma yapma nedenlerine ait düşünceler" den oluşan 3 kategori belirlenmiştir. Katılımcılar, ebelik bilgisinin, deneyimin yanı sıra eğitim sırasında kazanıldığını ve kazanılan bu bilgi ve deneyimin sanata dönüştürüldüğünü ve her ebenin bu bilgiye sahip olması gerektiğini ifade etti. Katılımcılar ebelerin bilgiye ulaşmasında, teknolojiyi aktif kullanmayı, mesleki tatmin eksiliğinin giderilmesini, teşvik ve takdir edilmeyi, uzmanlaşmaya olanak sağlanmasını önemli buldu. "Mesleki ve Bireysel Değerler" teması ebelik felsefesinin aksiyoloji alanı ile ilişkisini tanımlamaktadır. Bu tema 2 kategoriden oluşmaktadır. Katılımcıların çoğu ebelerin ebelik bakımına gereksinimi olan birey ve/veya yakınlarına hizmet verirken sahip olması gereken bireysel değerlerin olması gerektiğini ve ebenin hata karşısında alması gereken mesleki sorumluluklarının öneminden bahsetmişlerdir. Felsefenin temel alanlarından faydalanılarak ulusal ebelik felsefesi geliştirmek amacıyla yapılan bu çalışma sonucunda, 3 ana tema belirlendi ve bu temalara göre bazı çıkarımlar elde edildi. Ebeliği ontolojik açıdan açıklayan "Profesyonel sağlık disiplini" temasına göre; ebelik mesleği için deneyimin önemli olduğu, insanlık var olduğu sürece devam edeceği, tek bir cinsiyete dayalı olmadığı, Kadın, yenidoğan, çocuk, toplum ve üreme sağlığının temeli olduğu belirlendi. Ebelik mesleğini Epistemoloji açısından açıklayan "Ebelik bilgi ve uygulamalarının geliştirilmesi" temasına göre; bilimsel bilgiye ve deneyime dayalı olması gerektiği, ebelerin bilgilerini güncel tutmasının önemi ve teknolojiden daha fazla yararlanılması gerektiği ve alaylı ebe algısının günümüz yüzyılında değişmesi gerektiği belirlendi. Ebeliği ankiyoloji açısından açıklayan "Mesleki ve bireysel değerler" temasına göre; Ebeler, hizmet verdiği birey/ler, meslektaşları, diğer sağlık ekibi üyeleri, gruplar ve toplum ile ilişkilerinde; insan onuruna saygılı, anlayışlı, hoşgörülü, sabırlı, empatik, yardımsever, bilinçli, sorumluluk sahibi, sakin, sevgi doludur ve mahremiyete özen gösteren anlaşılır bilgilendirmeyi yapan bireyler olması gerektiği, diğer yandan ebeler alanı ile ilgili tüm uygulamalarda dikkatli dürüst, yasa ve yönetmeliklere uyma, yetkisinin dışına çıkmama, ekip anlayışı ile çalışma ve ebelerin mesleki değerlere sahip olması gerektiği bulundu.