

VIRTUAL MOBILITY (VM) GRANT APPLICATION TEMPLATE

This application is submitted by the VM grant applicant to the Virtual Networking Support Manager, who coordinates the evaluation on behalf of the Action MC.

Action number: CA18211

VM grant title: "Spread Devotion outcome into Academy and society. A brief survey collecting/saving 4 years' experience and suggestions from experts, researchers mothers."

VM grant start and end date: 01/05/2023 to 30/06/2023.

Grantee name: Alessia Melacca

Main objective of the Virtual Mobility Grant

(max.200 word)

Applicant enters max. 200 word summary here.

The main objective of the VM is to build a survey to explore the bases for addressing crucial educational issues to be taught and learned for facing with the current and next challenges in childbirth explored during DEVOTION (birth related trauma, respectful and compassionate care).

Starting from the DEVOTION main findings related to birth trauma [1,2,3], the impact of pandemic elicited the general failure of standard childbirth attention and care. The birth environment has been affected. influencing the quality and nature of interactions among care providers, women, and their families, and stressing the childbirth double discomfort, due to inappropriate birthplaces and culture [4,5].

The aim of this survey is to collect the optimal advice from MC members, participants, researchers to save the CA experience and to address the great COST research to policy and academy.

The main objectives we will achieve with this survey are:

- defining the best actions to move in education and clinical practice/training to prevent, avoid and treat birth related trauma.
- identifying stakeholders able to lead these actions (i.e., Universities);
- pointing out the most effective and lasting strategies to introduce and consolidate these actions. (i.e. side curriculum).

[1] Uddin N, Ayers S, Khine R, Webb R. The perceived impact of birth trauma witnessed by maternity health professionals: A systematic review. Midwifery. 2022;114:103460.

[2] World Health Organization. The prevention and elimination of disrespect and abuse during facility-based childbirth. 2015. https://apps.who.int/iris/bitstream/handle/10665/134588/WHO_RHR_14.23_eng.pdf

[3] Horsch A, Garthus-Niegel S, Ayers S, Chandra PS, Hartmann K, Vaisbuch E, Lalor J. Birth trauma and childbirth-related posttraumatic stress disorder: a review. Lancet Public Health. (under review).

[4] Horsch A, Lalor J, Downe S: Moral and mental health challenges faced by maternity staff during the COVID-19 pandemic. Psychol Trauma. 2020; 12(S1): S141-S142.

COST Association AISBL | Avenue Louise 149 | 1050 Brussels, Belgium T+32(0)25333800 | F+32(0)25333890 | officeacost.eu | www.cost.eu





[5] Topalidou A, Thomson G, Downe S: COVID-19 and maternal mental health: Are we getting the balance right? medRxiv. 2020.03.30.200479

Working Plan:

Description of the collaborative initiative to be implemented.

(max.500 word)

Applicant enters max. 500 word summary here.

Starting from our international multi-professional group we are planning to design a qualitative survey to be administered to all the attendees during the last MC committee in Malta.

This work will be in line with other COST projects (that influenced childbirth research and culture in Europe), in continuity with the work already done [6,7,8]

The qualitative survey will be a very short questionnaire (to be filled in both directly or via web) focusing on members' suggestions on possible research and teaching future lines facing with the educational and clinical challenges highlighted in the childbirth care field.

Working plan in detail:

01/05/2023 -15/06/2023 Build the qualitative survey for multidisciplinary target audience.

15/06/2023- 24/06/2023 Prepare a short presentation of the VM to involve attenders of the MC committee in Malta.

25/06/2023 - 30/06/2026 Administer the survey to participants of the MC committee in Malta (26-28/06/2023) and collect answers.

Write a commentary/paper draft to spread findings for future research (before the end of 2023).

[6] Melacca A, Urso C, Calleja-Agius J et al. Changing birthplaces to care for healthcare workers, lessons from the pandemic: A scoping review. Open Res Europe 2023, 3:7 https://doi.org/10.12688/openreseurope.15224.1

[7] Morano S. & Calleja-Agius J A "Cold Case" Of Neonatal Death In Italy: A Fulfilling Prophecy or A Lesson Not Learnt? International Journal of Prenatal & Life Sciences. 2023. ISSN: 2945 011X, DOI: 10.24946/IJPLS

[8] Squaring the Circle: Normal birth research, theory and practice in a technological age; ISBN: 9781780664408; Editors: Soo Downe, Sheena Byrom.2020

Plan for Participation:

Indicative list of participants in the collaborative initiative (short description of their expertise and envisaged contribution).

(max.500 words)

Applicant enters max. 500 word summary here.

Under the lead of the applicant, Alessia Melacca (University of Florence) there will be the close involvement of the following participants who will be having regular online meetings via Zoom between 01/05/2023 and 30/06/2023.

Prof. Sandra Morano (Italy) MD, PG in Reproduction Pathophysiology, Obstetrics and Gynaecology and Sexual Medicine is Adjunct Professor in the Department of Neurology, Ophthalmology, Genetics and Maternal Infant Sciences, in Genoa. Her work and research contributed to disseminate birth Centres



Culture, Practice and Actions in Italy. In fact, she created, and was the head of, the first Italian Birth Centre. Also, she was the Italian PI of the Optibirth Study (2012-2017). After many years spent in order to change birthplaces and culture mainly from the Midwifery perspective-even though in an interdisciplinary vision-currently she's addressing the COC philosophy directly to the Medicine realm, introducing it in Continuing Medical Education curricula and classes. She will contribute to define the design of the survey.

Olga Gouni (Cosmoanelixis – Greece): focus of interest is psychology and especially prenatal psychology which she has been taught by the pioneers of it Jon RG Troya Turner: Whole-Self Prenatal Psychology, as well as other pioneers. Olga introduced Prenatal Psychology in Greece and have taught it to graduate professionals in the Kapodistrian University, School of Philosophy, Department of Experimental Pedagogy. She is also a writer and educator for the e-learning program in Prenatal Psychology offered by the Kapodistrian University (EKPA).

Due to her great experience in organising congresses she will have a key role in disseminating the survey.

Prof. Rosita Gabbianelli (Italy) is an Experienced Full Professor of Biochemistry University of Camerino with a demonstrated history of working in the higher education. Skilled in Nutrigenomics, genetic and epigenetic responses to xenobiotics during early life. Her expertise will assure an innovative point of view regarding the findings of the survey.

Prof. Jean Calleja Agius (Malta) is a practising obstetrician and gynaecologist from Malta, who is also a working mother with a young child and is also the Head of Department at the Faculty of Medicine. She will be offering her expertise in making this VM successful through her collaboration in the conceptualizing of the survey and in the data analysis.

Main expected outputs:

Main expected results and their contribution to the progress towards the Action objectives (either research coordination and/or capacity building objectives) and deliverables.

(max.500 words)

Applicant enters max. 500 word summary here.

The project "Spread Devotion outcome into Academy and society. A brief survey collecting/saving 4 years' experience and suggestions from experts, researchers mothers." will contribute to the COST ACTION 18211 aim of developing optimal health services, by exploring the impact of limited resources on perinatal traumatic stress and women's reproduction wellbeing.

Deliverables will consist of:

- Building a tool (survey).
- Collecting suggestions form a very unique COST ACTION project that crossed an epochal pandemic

Contribution to the COST Action Strategy:

How will the Virtual Mobility contribute to the COST Excellence and Inclusiveness Policy¹ and to the Action plans for stakeholder engagement and promoting participation of researchers from Near Neighbour Country (NNC) and International Partner Country (IPC)², and to the approved virtual networking strategy, if available.

¹ https://www.cost.eu/who-we-are/cost-strategy/excellence-and-inclusiveness

² As described in the Action Memorandum of Understanding (MoU)



(max.500 words)

Applicant enters max. 500 words summary here.

The main contribution of this virtual mobility to the DEVOTION's strategy, as per objectives in the Memorandum of Understanding, is understanding traumatic stress in maternity care staff and focusing on prevention and intervention. But also forming coalitions to accelerate the translation of that knowledge into best practices that can be shared across Europe to reduce the social and economic burden arising from negative/traumatic experiences stress on perinatal workers during pandemic, a universal point of no return for health systems (HSs).

We believe that designing a simple survey and collect precious suggestions will be the opportunity to reduce the gap between science and culture, policy makers and society, bringing evidence to knowledge end users.

Also, it will help building an international network between clinicians involved in maternity care and developing future standards which will hopefully reduce fragmentation, stimulate innovation (jointly with stakeholders/end users) and accelerate the normal childbirth culture. Finally, it will maximize the dissemination of the DEVOTION's outcome.