

Early Social Orphanhood as a Relevant Problem of Russian Health Care (On the Example of the Chelyabinsk Region, Russia)

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Abstract

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BACKGROUND: The second decade of this century is characterised by the fact that the number of pregnant women who intend to give up their children has considerably decreased. However, despite this, the proportion between the number of abandoned children and all newborns increased from 2009 to 2014.

AIM: The goal of this work is to scientifically substantiate changes in Russian legislation based on a comprehensive analysis of the main trends in the development of early social orphanhood and changes in the medical and social characteristics of mothers who give up their children.

MATERIAL AND METHODS: The general aggregate of mothers who gave up their children in the Chelyabinsk Region has been studied. In total, 1,438 mothers were observed in 2009-2017. The information has been copied from the reports and records for 2009-2017 found in 51 maternity homes of the Chelyabinsk Region: reporting form No. 32 "Information on Medical Care for Pregnant Women, New Mothers and Women in Labor" and registered form No. 96 "Labor and Delivery Medical Record".

RESULTS: During the period under study, on average, 158 newborns per year were abandoned in maternity homes of the region: 51 children were abandoned by residents of the regional centre, 74 and 33 were abandoned by the women who lived in urban districts and rural municipalities, respectively. Today, mothers who give up their children tend to be marginalised. Two-thirds of them give birth to children out of marriage. Seven out of ten do not have a regular income, and six out of ten have socially significant diseases caused by their lifestyle.

CONCLUSIONS: The decline in attention to the prevention of early social orphanhood is caused by the inevitable increase in the number of newborns left without parental care. Every year, the number of well adapted in society women who give up their children when they find themselves in a difficult life situation is decreasing. The number of marginalised pregnant women is growing. Reducing the rate of abandonment of newborns among the marginalised contingent of pregnant women requires changes in the medical legislation of the Russian Federation.

Introduction

At the cusp of the 20th-21st centuries, Russia underwent the third wave of orphanhood, reasons for which considerably differed from the first two ones. The orphanhood of the first wave associated with the Civil War and the second wave associated with the Great Patriotic War were caused by parents' deaths. Now orphans are children who have biological parents not involved in their upbringing and care [1]. As of December 31, 2013, in the state data bank, the number of orphans and children left without parental

care was 501,023 [2].

Sociologists [3] and psychologists [4] have been trying to explain social orphanhood as a form of deviant motherhood for a long time. Thus, supporters of the socialisation theory consider the abandonment of the newborn as a consequence of unsuccessful or insufficient socialisation of the woman herself [2], [5].

E.R. Yarskaya-Smirnova, together with co-authors, determines subjective and objective factors of the abandonment risk [6]. The objective factors include somatic or mental diseases in the woman's history or their occurrence during her pregnancy, as

well as the child's disability. According to M.A. Kostenko, the latter factor is especially important in the background of the low availability of timely medical, pediatric care. The subjective factors include non-readiness to perform parental responsibilities, pressure from the social environment, and the woman's deviant behaviour. The mothers who give up their children make up a non-uniform group. They are not always the main initiators of the abandonment, and close people are often involved in making the decision. The relatives' influence can be both indirect and direct [6], [7]. At the beginning of the 21st century, healthy children are abandoned more often than children with disabilities, and this mainly comes with the "social disadvantage of the mother (family) and her addiction (alcoholism, drug addiction)".

The analysis of foreign sources has shown that this problem is not urgent for the indigenous population of the European Union. Researchers study the problem of early social orphanhood in the third world countries and the indigenous people of economically developed countries that emerged from former colonies [5], [7], [8], [9], [10]. However, while in the third world countries the main cause of early social orphanhood is maternal death during delivery and subsequent refusal of the community to bring up a weakened and sick newborn [8], [10], [11], [12], in the Russian Federation, in 80% of cases, it is caused by deviant motherhood of mothers who give up their children justifying this by their difficult material status or living conditions [13].

Since the beginning of the new century social orphanhood, which, according to the children's surgeon L. Roshal, was omitted by the Russian society, has attracted the public attention. It was followed by considerable funding, primarily within the "Health" national project that was a program to improve the health of Russian citizens. It was announced by President V.V. Putin and started on January 1, 2006. According to this project, RUB 425.3 billion was allocated to improve the quality of medical care from 2006 to 2009. Although the project did not aim at preventing social orphanhood, while performing its normal functions, the obstetric and gynaecological service managed to work efficiently to reduce the number of mothers abandoning their newborns, and thus reduced the number of early social orphans [14]. However, in the 2010s, the efforts of obstetric and social services ceased being so efficient. Despite a considerable reduction in the number of pregnant women who were classified as potential mothers who would give up their children and, therefore, were subject to preventive work, the number of newborns left without the parental care slightly decreased from 0.3% of all newborns in 2011 down to 0.25% in 2014 (Information on identifying and organizing the life of orphans and children left without parental care, 2015).

The latest study on the early social orphanhood in Chelyabinsk as a typical regional centre of the Russian industrial region was carried out

by O.V. Denisov, the chief obstetrician-gynaecologist of the city of Chelyabinsk, almost ten years ago. During this period, the socio-medical characteristics of mothers who abandon their children greatly transformed [14]. Most of such women ceased to be sensitive not only to psychological effects but also to material incentives. The habitual image of a mother who gives up a child as a young woman who is immature psychologically and personally and is greatly influenced by the people, she is surrounded by is not consistent with the reality any more.

The goal of this work is to scientifically substantiate changes in Russian legislation based on a comprehensive analysis of the main trends in the development of early social orphanhood and changes in the medical and social characteristics of mothers who give up their children.

Material and Methods

The above goal of the study was achieved using the method of copying data from the reports and records for 2009-2017 found in all maternity homes of the Chelyabinsk Region: reporting form No. 32 "Information on Medical Care for Pregnant Women, New Mothers and Women in Labor" and registered form No. 96 "Labor and Delivery Medical Record". These are the data obtained from legal entities – medical organisations that provide obstetric and gynaecological care during pregnancy, childbirth and postnatal period. The history of childbirth is the main medical document of the maternity home (maternity ward of the hospital), which is compiled for every pregnant woman, a woman in labour or new mother. The general aggregate of mothers who had given up their children in the Chelyabinsk Region was studied. In total, 1,438 mothers from 51 maternity homes were observed in 2009-2017. These maternity homes were divided into three groups of administrative and territorial entities – the megalopolis, the regional centre of Chelyabinsk (nine maternity homes), 11 municipal districts (16 maternity homes), and 26 rural municipal areas (26 maternity homes). The division into these three groups of territories is related to different standards of living in them, along with the existing cultural differences and national traditions of the local population.

The statistical regularity was analysed by using the SPSS Statistics Base 22.0 statistical software package. The average and relative values and their representativeness errors were calculated. To determine the randomness or significance of changes in the levels of indicators over the years of the study, a non-parametric test – the iteration criterion (Z) – was used due to improper distribution of observation units.

The study received a positive conclusion of the ethical commission concerning the observance of ethical standards (approved by Order No. 5 of 05/26/2017, South Ural State Medical University).

Results

In the Chelyabinsk Region, the work on preventing early social orphanhood interpreted as women's giving up their children in obstetric facilities was efficient for the first time when implementing the "Health" national project in 2006-2008. The number of newborns abandoned decreased annually. However, the 2009 economic crisis interrupted not only this positive trend but also the research itself. The present study began in 2015. Over the next nine years, an average of 158 babies was abandoned in maternity homes of the region per year: 51 children (32.3%) were born by residents of the regional centre, 74 (46.8%) and 33 (20.9%) were children born by the women who lived in municipal districts and rural municipal areas, respectively.

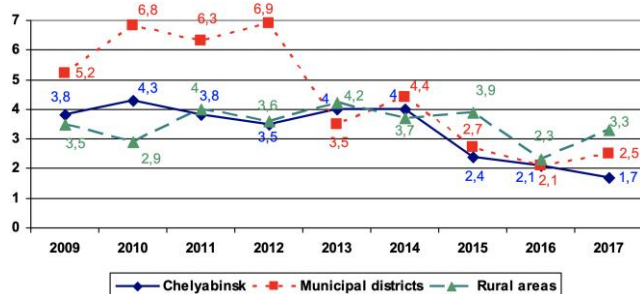


Figure 1: Dynamics of the Prevalence of Abandonment of Newborns in the Chelyabinsk Region for 2009-2017 (per 1,000 newborns)

Due to the different number of women giving birth to children in three groups of territories, the indicator of the prevalence of abandonment of newborns is more informative. It is obtained by the ratio of the number of abandonment of newborns to the total number of births per 1,000 newborns. The study of the prevalence rate showed that women living in municipal districts had abandoned their children most often: an average of 4.5 ± 0.9 cases per 1,000 newborns (Figure 1). The peak of abandonment among residents of municipal districts was from 2009 to 2012. However, then the indicator reliably ($Z < Z_{05}$) decreased to the values that are close to those of the regional centre and the rural area. In total, over nine years of study, the prevalence rate of abandonment of newborns by women in maternity homes in urban districts declined considerably ($Z < Z_{05}$): from 5.2 cases per 1,000 babies in 2009 down to 2.5 cases in 2017. The rate of decline was 52%. There were similar dynamics for the prevalence rate of abandonment of newborns among the residents of the

regional centre. This figure also decreased considerably ($Z < Z_{05}$): from 3.8 cases per 1,000 babies in 2009 down to 1.7 cases in 2017. The decline rate was 51.3%.

On average, the prevalence rate of abandonment of newborns among the women living in rural areas is approximately the same as among the residents of the regional centre: 3.5 ± 0.2 and 3.3 ± 0.4 cases per 1,000 newborns, respectively. However, the dynamics of this indicator for nine years of observation can be characterised as stable ($Z > Z_{05}$), i.e. the levels of the indicator change within random fluctuations.

Since 2013, the prevalence rates of abandonment of newborns in three groups of territories had become close to one another and, until 2016, there were no considerable differences ($Z > Z_{05}$). However, in 2017, this indicator for the rural women grew up to 3.3 cases per 1,000 newborns.

The habitual image of a mother who abandons her children as a young woman who is immature psychologically and personally and is greatly influenced by the people, she is surrounded by is not consistent with the reality any more. Only every tenth mother who abandons her child in the Chelyabinsk Region is characterised like that. Now, a typical representative of the women under study is a woman, whose average age is about 27. The ratio of older women has considerably increased. Thus, the proportion of women aged 30-39 has doubled as compared to the first decade of the new century. Also, it has become a regular thing to meet women aged 40-49 who abandon their children. This has not been observed before.

Such a phenomenon as the repeated abandonment of a child is especially noteworthy. Unfortunately, it is impossible to accurately determine the number of previous cases of abandoning children by such mothers in maternity homes because they are not registered. However, according to the expert opinion of obstetrician-gynaecologists, reflected in the present article, who are responsible for unofficial (until 2012) and official registration (since 2012) of abandoned newborns, in many maternity homes of the Chelyabinsk Region, there were cases of repeated abandonment of a child. Also, some present mothers giving up their children abandoned their older child later (thereby also making them social orphans) rather than during their stay in the maternity home. They disclosed this information when they came to maternity homes to give birth to their last child. As a result, for nine years of the observation, there is information about 12 women living in the Chelyabinsk Region who have given up their children more than once.

Such cases are not singular. This is indirectly indicated by the obstetric history of mothers who abandoned their children in the Chelyabinsk Region. By the age of 27, they have already got an average of

four pregnancies, taking into account the latest that made them the object of this study. Registered form No. 96 "Labor and Delivery Medical Record" provided more evidence the marginalisation of women who abandon their newborns. Thus, considering the previous pregnancies of the mothers who abandoned their children at birth, it is necessary to note that an average of 1.8 of such pregnancies ended up in childbirth or 1.3 in abortion at the request of the woman who lived in the regional centre, 1.9 or 1.6 – if such woman lived in a municipal district, and 1.8 and 1.2 – if she lived at a rural area, respectively. It is noticeable that 80% of these women terminated their pregnancy and thus demonstrated their unwillingness to have a child. Probably, they could not solve the issue on the latest pregnancy due to some circumstances. As a result, by 35 years old – the age allowed for voluntary sterilisation – representatives of this group might have more than six pregnancies, including two or three that ended up with childbirth and abandoning more than one child. It is possible to comply with another condition – having two children – for voluntary sterilisation among mothers who abandon their children only if to take into account the fact of the birth itself because these women are not involved in bringing up their children in its legal sense.

Today, mothers who abandon their children are characterised by one key feature – they tend to be marginalised. Thus, according to the data of the present study, two-thirds of these adult women do not have stable and strong family relations, and their children's fathers are casual partners: on average, this is $65.8 \pm 4.1\%$ of such mothers who live in the regional centre, $63.3 \pm 6.1\%$ and $62.5 \pm 3.1\%$ are from municipal districts and rural areas, respectively. Even more representatives of the group under study do not have a regular income: on average, it is $71.6 \pm 2.2\%$ among those living in the regional centre, $77.7 \pm 2.2\%$ and $59.2 \pm 2.5\%$ among those who live in municipal districts and rural areas, respectively. It is necessary to note that over nine years of the observation, the proportion of the women without a stable income ($Z < Z_{05}$) increased in all compared groups of territories.

However, the most important feature of marginalisation is socially significant diseases determined by Order of the Government of the Russian Federation No. 715 dated 01.12.2004 "On approving the list of socially significant diseases and the list of diseases that are dangerous to others" caused or leading to asocial behaviour. These are HIV, intellectual disabilities, hepatitis B, C, drug addiction, alcoholism, other pathological addictions, infections mainly transmitted sexually, and tuberculosis (Resolution of the Government of the Russian Federation No. 715, 2004) [15]. The highest incidence of this disease is among mothers who give up their children living in municipal districts: 811.9 cases per 1,000 of the corresponding group, i.e. four out of five have a socially dangerous disease. This indicator is twice lower in mothers who abandon their

children living in rural areas. This level of the socially considerable pathology is in the intermediate position in residents of the regional centre.

The first place in terms of morbidity is occupied by mental and behavioural disorders associated with the use of psychoactive substances. Thus, half of the mothers who abandon their children living in municipal districts suffer from alcoholism or drug addiction. Every fourth mother from the regional centre and every fifth one from the rural area suffers from the same dependence. Infectious diseases – mainly, hepatitis C and B, as well as syphilis – are in second place in terms of prevalence among socially dangerous diseases. Six cases of tuberculosis registered in mothers who abandoned their children during 2009-2017 are noticeable because according to the official data (reporting form No. 32), the prevalence of socially significant pathology with the remaining pregnant women whose pregnancy ended up with childbirth and who live in the Chelyabinsk Region, but not included in the group under study, is within the limit of error.

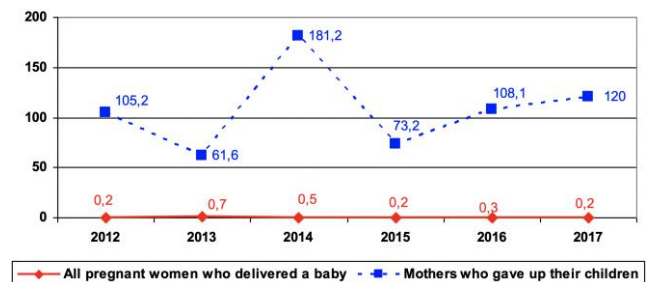


Figure 2: Dynamics of HIV Prevalence among Pregnant Women who Delivered Babies in the Chelyabinsk Region in 2009 – 2017 (per 1,000 pregnant women who delivered babies)

HIV prevalence is a separate issue. According to Form No. 32, "Information on Medical Care for Pregnant Women, Women in Labor and New Mothers", the incidence of HIV is extremely low among pregnant women living in the regional centre but not included in the group under study. It is from 0.2 to 0.7 cases per 1,000 pregnant women who ended their pregnancy with childbirth (Figure 2), and it changes over the observation period within random fluctuations. This situation looks completely different among mothers who give up their children – 70.5 cases per 1,000 of the relevant group. This is the average for six years since the official registration of newborns abandoned in obstetric facilities. Moreover, in 2014, every sixth mother abandoning her child was HIV-infected.

Discussion

In Russia, the main efforts to prevent early social orphanhood largely still belong to enthusiasts.

Therefore, there is an urgent need for a unified national policy aimed at reducing the number of newborns left by mothers.

It is necessary to note that the latest study on early social orphanhood in Chelyabinsk, a typical regional centre of the industrial region, was conducted by O.V. Denisov, chief obstetrician-gynaecologist, almost ten years ago [14]. During this period, the socio-medical characteristics of mothers who give up their children have been greatly transformed [14]. Most of such women have ceased to be sensitive not only to psychological effects but also to material incentives.

While earlier, the work on preventing the abandonment of newborns started in female counselling centres and was efficient in the cases with women were well-adjusted in society but somehow ended up in difficult life situations [14]. Now, this is not enough. The reason is that only every third of future mothers who abandon their children is registered in the female counselling centre, and only every sixth attends it relatively systematically. The rest of them visit it at the 30th week of pregnancy to obtain a disability certificate for the pre-maternity leave. It is noteworthy that the average first appearance time for the registration is from 20.7 weeks in the regional centre to 21.6 weeks in cities of the region.

As a result, the traditional methods aimed at preventing the abandonment of newborns and implemented by medical staff in female counselling centres don't work. To reduce the abandonment rate among marginalised pregnant women, it is necessary to change the medical legislation. The following recommendations are promising:

- To reduce the age of voluntary medical sterilisation from 35 to 27 years for women suffering from socially significant diseases and having two births or one birth and child abandonment in their history;

- To include two or more socially significant diseases (the most frequent combinations of drug addiction with HIV and hepatitis C, B or alcoholism with syphilis and substance abuse) or one socially significant disease and the fact of abandonment or deprivation of motherhood in the list of social indications for the pregnancy termination;

- To prevent all forms of social orphanhood more efficiently and timely, to allow registering the mothers who abandoned their children without parental care in Russian subjects on a legislative basis.

The following main conclusions can be made:

1. The decline of attention to the prevention of early social orphanhood is caused by the inevitable increase in the number of newborns left without parents.

2. Every year, the number of well-adapted in

society women who leave their children when finding themselves in difficult life situations is decreasing, and the marginalized contingent of pregnant women is growing.

3. Reducing the rate of abandonment of newborns among the marginalized contingent of pregnant women requires changes in the medical legislation of the Russian Federation.

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