Bibliometric Analysis of Research Trends and Novelty of Midwifery Policy

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Article

Bibliometric Analysis of Research Trends and Novelty of Midwifery Policy

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Abstract

Midwifery policy is important in regulating services, and its significance cannot be overstated. Despite the ongoing efforts in formulating policy, there remains a need for further analysis. This is because evidence-based research in midwifery serves as a foundation for enhancing the professionalism of the service practices. Bibliometric analysis of publications pertaining to midwifery policy is absent, leaving a gap in understanding trends and concepts. Therefore, this research aimed to determine trends in the number of publications, and visualisation of the relationship on the topic of midwifery policy through bibliometric analysis. The method used systematic reviews with the stages following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) diagram. Scientific publication data related to midwifery policy was retrieved through dimensions.ai from 2010 to 2022 and the data was analysed using VOSviewer. The results showed that first, there was an annual

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exponential growth in the number of publications and citations on the topic. Second, there were 224 items, 8 clusters, and 10047 links with a strength of 63352 on the topic of midwifery policy. Third, trends of research related to the topic were focused on hospitals, behaviour, and framework. Fourth, the research related to policy were topics with a low-density category, namely professional development, registration, and public health. Research results could identify trends and novelty in midwifery policy and recommend directions for further analysis.

Keywords: bibliometric analysis; midwifery policy; novelty; trends

Introduction

Health policy is implemented to formulate programs at both the central and local levels, enabling interventions to be made in the determinants of health (Oliver and Parolin 2018). Furthermore, it has a substantial impact on both the global and national spheres, exerting a significant influence on the well-being of populations worldwide (Shakpeh et al. 2021). The concept is very important in arranging service midwifery (Ruhmel et al. 2022).

In this context, midwifery policy has been researched for various purposes concerning healthcare facilities (Mayra et al. 2021), education settings (Pollock et al. 2021), and service (McFadden et al. 2020). The professionalism of midwives represents a fundamental social contract, which is very important (Soytas 2021). Current midwifery policy still requires research to be carried out because the evidence in this service can be used as an application to increase professionalism (Mattison et al. 2021).

Figure 1 shows that many countries are interested in the topic of midwifery policy. The United Arab Emirates showed a pronounced interest in the subject before Australia.

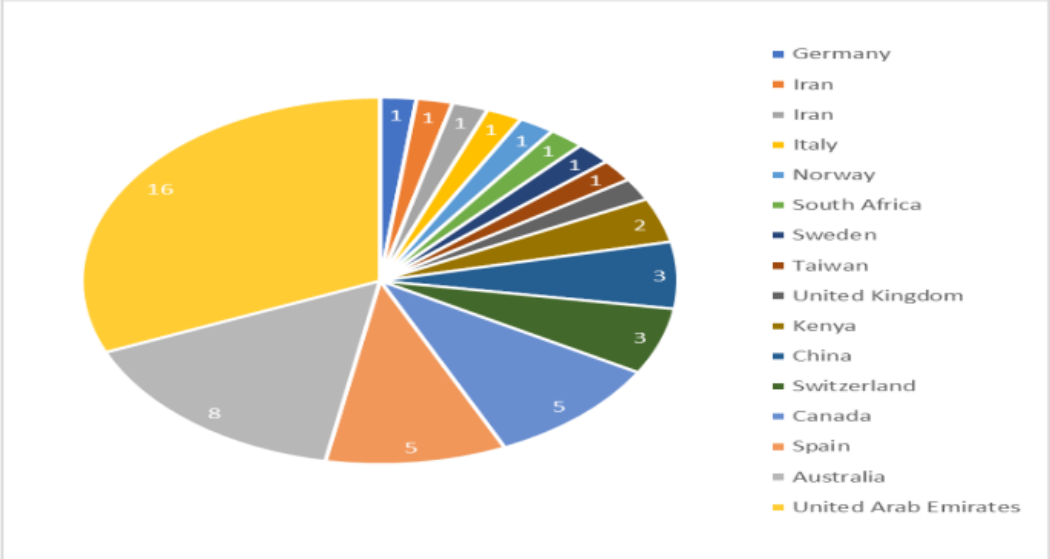

Figure 1: Interest according to the country to midwifery policy (Data: Dimensions 2023)

The data outlines the interest in general policy related to the field of midwifery. For research considering the specifics of policy, it is important to access more specialised information. This includes scientific articles and seminars dedicated to the aspects of midwifery policy. In the field of research, acquiring insight into trends and innovations concerning the topics is essential. This challenge is prevalent since analysis of bibliometrics on publications shows a lack of information on current trends and innovations. To address these gaps, comprehensive research has been conducted to answer the following questions:

- How many trends publications are on the topic of midwifery policy?
- How many trends are cited on the topic of midwifery policy?
- How can an individual facilitate network visualisation pertaining to midwifery policy?
- In what manner can visualisation be overlaid on the subject of midwifery policy?
- What is the methodology for conducting density visualisation on the topic of midwifery policy?

Bibliometric analysis is a scientific and quantitative method for evaluating published articles. This method identifies trends, developments, and research hotspots within a specific field of research. Furthermore, it provides valuable insights to navigate and understand the evolving landscape of the field. This analysis determines the current state of research, offering a foundation for the advancement of the respective field (Lam et al. 2022). Bibliometric analysis identifies areas and directions within a specific domain of research through the use of visualisation tools. This method has been used to evaluate theoretical information stored in databases such as Scopus. The use of visualisation tools enhances the interpretability of data, as an effective means to navigate and understand the complex dynamics of information (Anuar et al. 2022). These tools evaluate the migration and degradation environment (Zhang et al. 2022) and investigate trends in the research of radiotherapy glioma since 2011 (Abad-Segura et al. 2020).

The results obtained are highly valuable, warranting further development. This theme pertains to midwifery policy, catering to midwives and individuals requiring a comprehensive examination of past research periods and historical data. This is particularly pertinent for academics, research institutes, higher education institutions, and healthcare personnel (Mattison et al. 2021).

This research aims to investigate trends in publications, citation patterns, network visualisation, overlay visualisation, and density visualisation concerning the topic of linear regression through bibliometric analysis.

To accomplish the objectives, the structure of this work is organised as follows. The first section outlines the background, issues, and research goals. The second section

includes a comprehensive literature review on health systems and midwifery policy. The third section delineates the methods used, including data collection and analysis procedures. Subsequently, the fourth section presents the research results, followed by a detailed discussion. The fifth section offers conclusions, shows limitations, and provides recommendations for future research.

Research Literature

Health Systems

The health system shows considerable variation, particularly regarding the limitations within healthcare. According to the definition, a health system can be comprehended as "consisting of all organisations, institutions, and resources dedicated to producing health-related actions." In an extended definition, the concept includes all organisations, individuals, and activities primarily focused on promoting, restoring, or maintaining health (Jasper and Crossan 2012).

The successful implementation of a health system requires the formulation of health policy to guide the entire process (Asamani et al. 2019). Policy health refers to goals and objectives, as instruments, processes, and styles of a decision by taker decision, including implementation as well as evaluation (Courtot et al. 2020). In policy and systems, health can conduct characteristic research interdisciplinary, taken from cross-knowledge of health (Innvaer et al. 2002). This comprises collaboration from various departments, particularly those contributing to interdisciplinary group knowledge in the field of health (Nove et al. 2018). Within the realm of health policy, distinct components include policy nursing, policy midwifery, policy medicine, and others.

Midwifery Policy

The role of a midwife holds significant importance as a key element in the frontline of maternal and child health services (Tickle et al. 2016). Midwives collaborate with other healthcare professionals in managing aspects of pregnancy, childbirth, postpartum care, newborn health, and reproductive health. The execution of their duties is governed by regulatory legislation, ensuring adherence to established standards and guidelines (Lopes et al. 2015).

Policy in midwifery is part of the International Confederation of Midwives (ICM) which is the main promoter in the recognition and professional development of midwives (Hoover 2015). The implementation of midwifery practice includes a comprehensive understanding of the service delivery system, advocating for constitutional rights, and taking the initiative to enhance the quality of policy (Damayanti et al. 2019). Midwives also require legal protection based on principles of justice. Professionals practising obstetrics must adhere to conditions that uphold the values of justice, including fairness, equal opportunity, and the right to equality (Buchanan et al. 2022).

Midwifery policy serves as a proven framework for the ethical practice of obstetrics. The use is essential to enhance performance and ensure standards in practice (Chellappandi Vijayakumar 2018).

Methodology

There are five types of research metrics for data analysis, namely scientometrics, bibliometric, cybermetrics, informetrics, and altmetrics (Murugesu et al. 2022). The bibliometric analysis used is particularly well-suited for the dissemination of research papers, terms, and keywords. This methodology is instrumental in determining trends in the research. (Syros et al. 2022). Furthermore, analysis is a method of research used in knowledge libraries and information (Pahwa et al. 2022). Bibliometric analysis is very important in evaluating impact research based on the quote received (Page et al. 2021).

Data used in the research was based on an online search through https://app.dimensions.ai/ and was retrieved on May 30, 2023. The methodology used a systematic review, adhering to the stages outlined in the PRISMA flow diagram (van Eck and Waltman 2010). The stages in PRISMA include identification, screening, and inclusion, as shown in Figure 5. During Stage 1 (Identification), 776 records were detected from dimensions.ai, considering every main term search for midwifery policy, specifying “type of document: articles and proceedings”, and including all “published data in the range from 2010 to 2022.” In Stage 2 (Screening), the option “title and abstract” was selected for each term search, producing 50 records. Finally, in Stage 3 (Inclusion), the sample was refined, resulting in 726 articles accessible for further analysis.

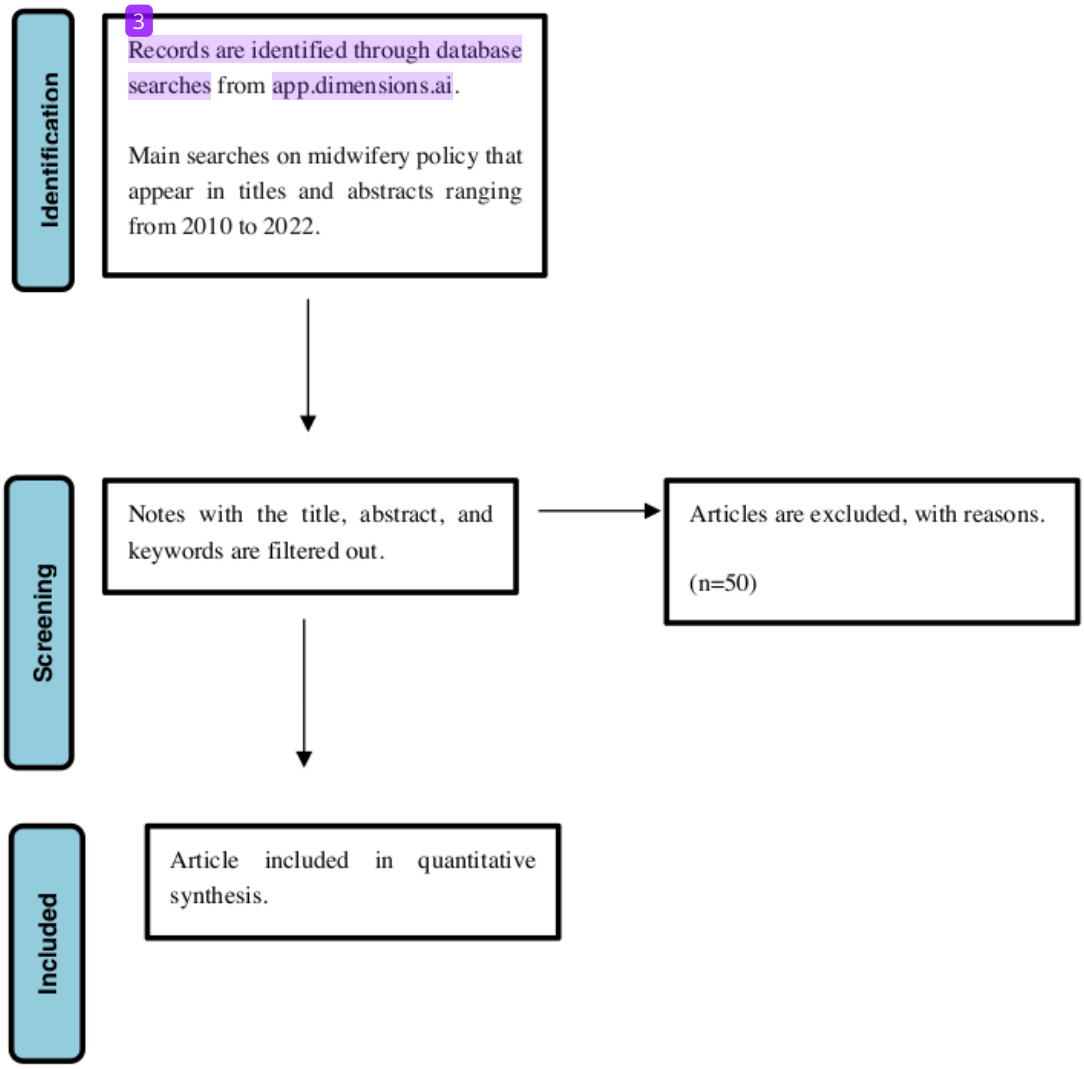

Figure 2: PRISMA (van Eck and Waltman 2010)

The data analysis was conducted using VOSviewer, a computer program designed for creating and visualising bibliometric maps. VOSviewer facilitates the mapping of bibliometric data, providing a visual representation that aids in the analysis of relationships and patterns within the literature (Brocklehurst et al. 2012). In this research, this analysis was reviewed by co-occurrence and co-author.

The co-occurrence analysis procedure is outlined as follows. Data sources are selected to read information from reference manager files. The selected fields for extracting terms are the title and abstract fields. A threshold is set with a minimum number of

occurrences for a term, which is determined to be 10. A total of 224 terms are selected for analysis based on these criteria.

The procedure for the analysis co-author has been as follows. The data type was selected, and a map was created based on bibliographic data. The option to generate a co-authorship folder based on bibliographic data was selected. The data source was determined and was read from reference manager files, specifically in the RIS file type. The type of analysis and counting method was specified, with co-authorship as the analysis type and full counting as the selected method. The threshold was set by specifying the maximum number of documents, which was established at two. Out of the 498 authors, 58 met the threshold. The selection was conducted by assessing the total strength of co-authorship links and those with the highest total link strength were selected.

Results and Discussion

Analysis of Number Publications

Searches conducted from 2010 to 2022 have produced scientific articles on publication. The number of publications related to midwifery policy per year is shown in Figure 3. The most significant enhancement occurred in the year 2021, showing an increase of 103 publications. In contrast, the lowest increase was observed in 2010, with an increase of 93 publications.

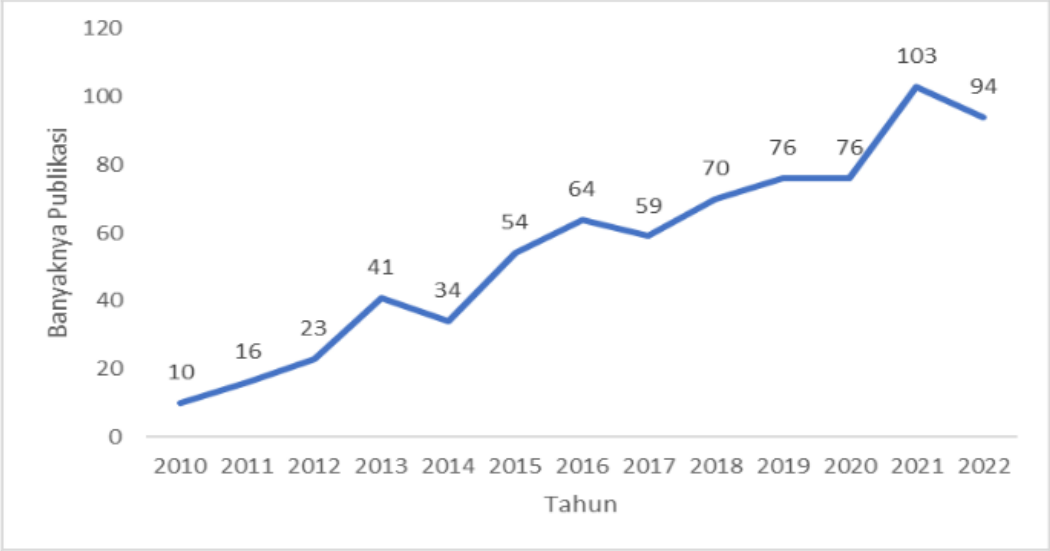

Figure 3: Amount of publication of midwifery policy from 2010 to 2022 (app.dimensions.ai)

Analysis of Citation

The number of citations for midwifery policy per year from 2010 to 2022 is presented in Figure 4. The highest and lowest improvement occurred in 2022 and 2010, reflecting an increase of 2319 and 2317.

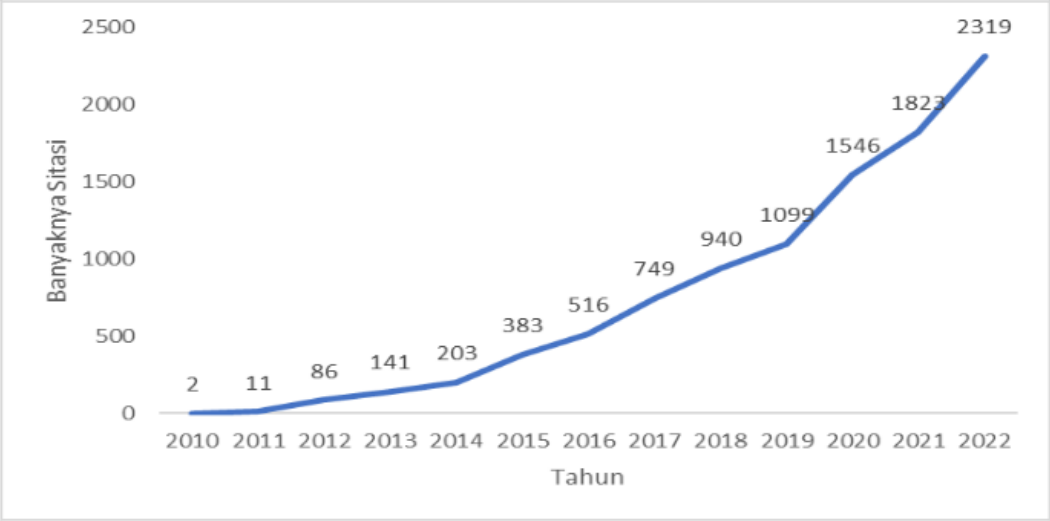

Figure 4: The number of citations for the topic of midwifery policy from 2010 to 2022 (app.dimensions.ai).

Analysis of Networks

Figure 5 shows the Network visualisation of 224 terms.

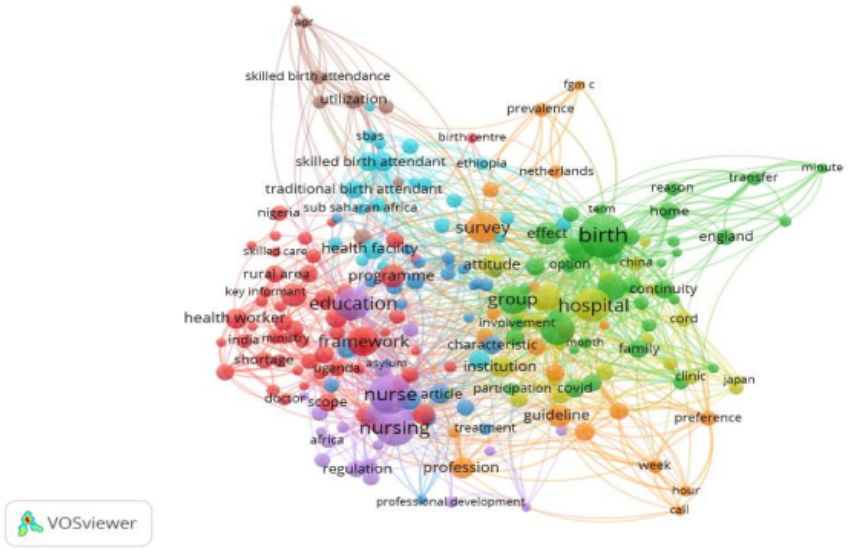

Figure 5: Network visualisation (VOSviewer)

A total of 224 terms related to elections have been identified. The connection between two items is shown by a line, signifying that these two items appear together in the title and abstract of a document. Conversely, the absence of a line between two items shows that they do not appear together in the title and abstract. Figure 5 shows a comprehensive overview, featuring 224 items organised into eightclusters. This is interconnected by 10047 links and the cumulative strength is recorded at 63352.

Analysis of Overlays

Visualisation overlays seen in Figure 6

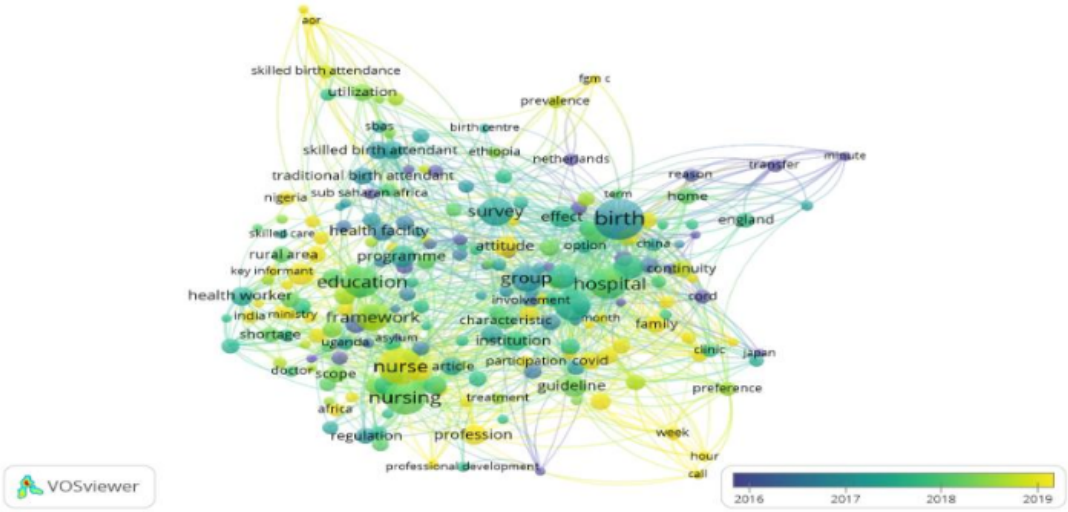

Figure 6: Overlay visualisation (VOSviewer)

VOSviewer also offers map overlay visualisation, which is applied to the 224 terms as shown in Figure 6. The overlay visualisation facilitates analysis based on keywords related to midwifery policy from 2010 to 2022, allowing the observation of trends in the titles of research related to midwifery policy.

In the map overlay visualisation presented in Figure 6, a yellow knot shows that the keyword is important in the research. For instance, trends during this period related to midwifery policy focuses on topics such as hospitals, attitudes, and frameworks.

Analysis of Density

Figure 7 shows the density visualisation of 224 terms.

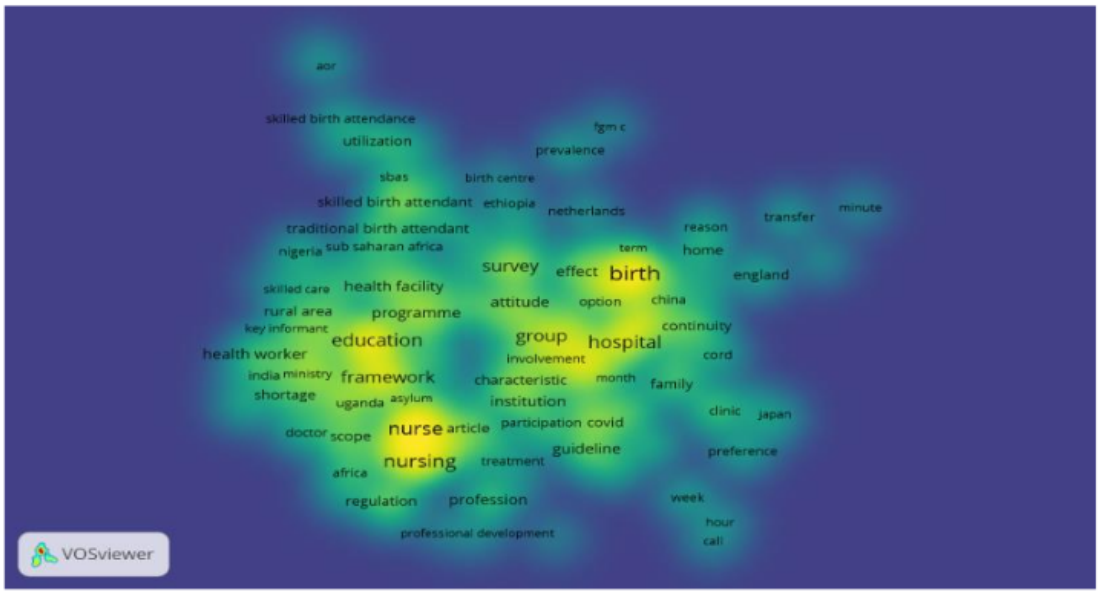

Figure 7: Density visualisation (VOSviewer)

Figure 7 shows visualisation density with a lot of items such as pregnancy, birth, and education. Items with yellow-coloured dots show that these topics have been frequently addressed in publications before. Therefore, the research topic related to midwifery-suggested policy is a subject with a low visualisation density in categories such as professional development, registration, and public health. This suggests that there is a relatively lower concentration of research or visualisations within these specific areas, as compared to other topics in published journals.

Analysis of Co-Author

Figure 8 shows the network visualisation for co-authors.

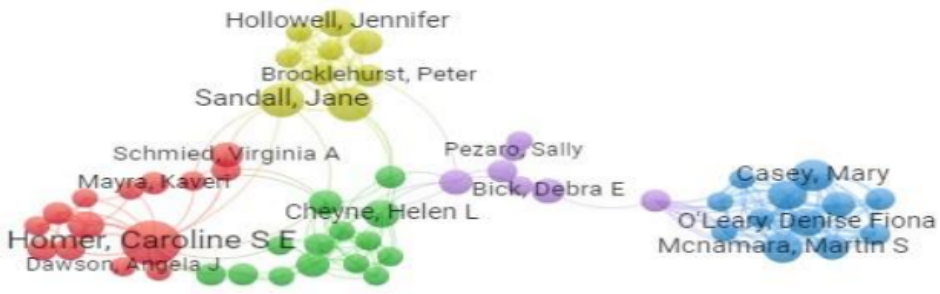

Figure 8: Network visualisation for co-author (VOSviewer)

Figure 8 presents a collaborative map among the main writers based on co-authorship analysis. The visualisation focuses on the thematic connections pushed by these writers and is associated with group network visualisation. This analysis spans the period from 2010 to 2022, showing a specific dispersion in the association of writers based on the co-authorship method. The network visualisation includes 58 research, showing 218 co-authorship links. The total count of co-authorships amounts to 498, and the network is categorised into 5 clusters, showing distinct thematic or collaborative groupings among the writers.

Discussion

Bibliometric analysis has been used in research focusing on the topic of midwifery policy. As depicted in Figure 3, the analysis aimed to derive insights regarding midwifery policy outcomes. The minimum number of publications occurred in 2010, while the maximum was observed in 2020, averaging 55, as shown in Figure 9. The number of publications shows an exponential increase each year over the specified time frame.

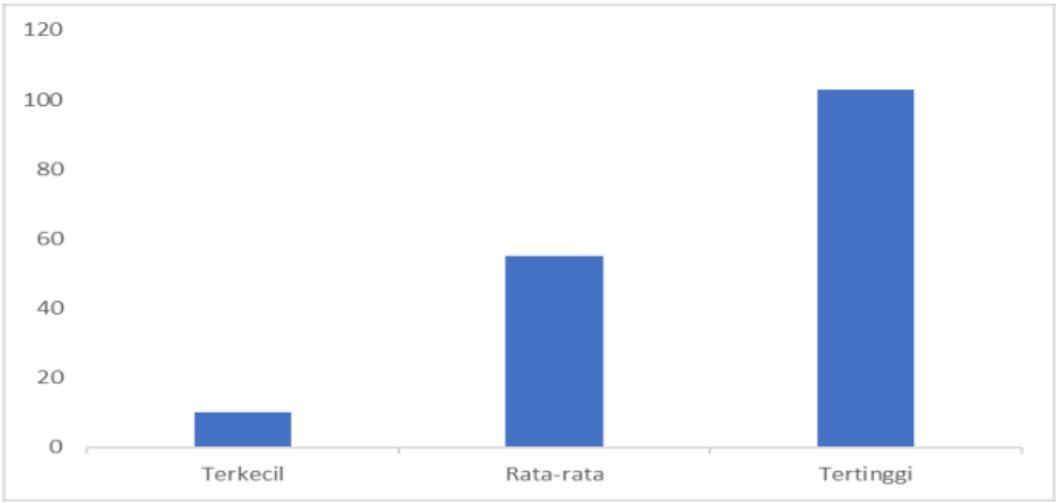

Figure 9: Histograms increase many publications from the smallest, average, and highest for the topic of midwifery policy.

According to Figure 4, the ascent in citations for midwifery policy shows the lowest occurrence in 2010 and the highest in 2022, averaging 755 (Figure 10). The number of citations also shows an exponential increase from year to year. Most articles lost citations articles entitled "Perinatal and Maternal Outcomes by Planned Place of Birth for Healthy Women with Low-Risk Pregnancies: The Birthplace in England National Prospective Cohort Research" by Brocklehurst et al. 2012, accruing 629 citations. This is followed by an article entitled "The Escalating Global Burden of Serious Health-

Related Suffering Projections to 2060 by World Regions, Age Groups, and Health Conditions" by Sleeman et al. 2019, with a total of 308 citations.

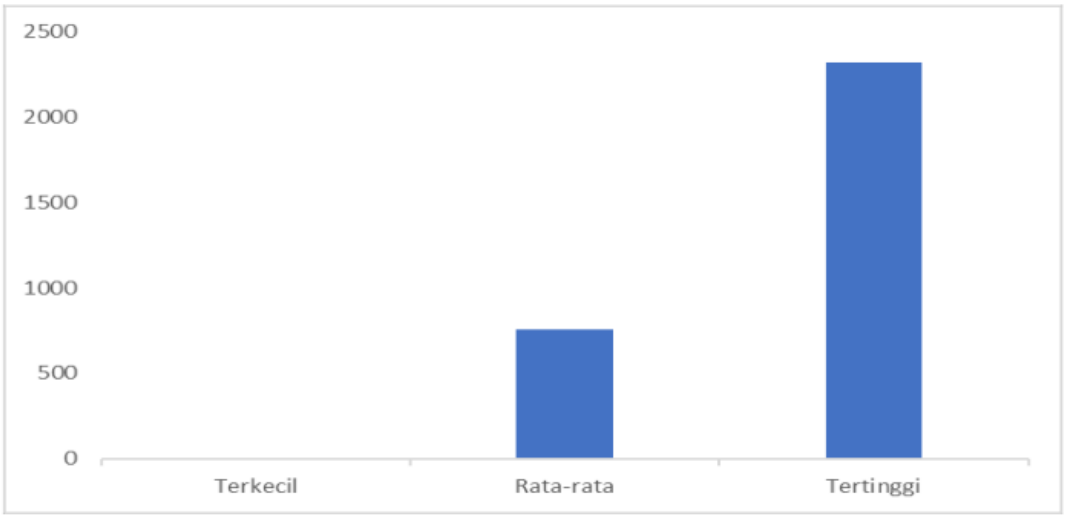

Figure 10: Histograms increase many citations from the smallest, average, and largest for the topic of midwifery policy.

To generate images 5 and 6 using VOSviewer, the procedural steps are elucidated as follows. Firstly, the data type is selected to facilitate the creation of a map grounded in text data and the establishment of a term co-occurrence matrix derived from textual information. Subsequently, data sources are deliberately obtained to extract information from reference manager files, with a specific emphasis on the supported file type, namely, "ris." The applied threshold is set to a minimum number of occurrences of a term, established at 10. Consequently, 373 terms out of the total 9248 meet this defined threshold. For each of these 373 terms, a relevance score is calculated. Based on this score, the most pertinent terms are systematically selected, and the default criterion is to select the top 60% of the most relevant terms.

Figure 5 shows that among the 224 items, there exist 8 distinct clusters. Cluster 1, 2, 3, 4, 5, 6, 7, and 8 comprise 60, 40, 26, 26, 22, 22, 21, and 8 items, respectively. For a more comprehensive understanding of these clusters, additional details are provided in Table 1.

Table 1: Clusters for the topic of midwifery policy (VOSviewer)

Cluster	Number of items	Member items cluster
1	**60**	Abortion, acceptability, accessibility, birth centre, Cambodia, community health work, community midwife, condition, consequence, depth interview, distribution, doctor, document, facilitator, framework, gender, health professional, health system, health worker, health workforce, human resource, India, initiative, integration, **policy marker.**
2	**40**	Anxiety, baby, birth, continuity, covid, decision, decision making, effect, England, family, group, inclusion, labour, man, midwifery continuity, **midwifery unit**, minute, month, mother, option, satisfaction, stress, term, women experience.
3	**26**	Actor, article, clinical practice, concept, contribution, culture, effectiveness, midwifery student, **patient safety**, phase, researcher, specialist, systematic review, treatment.
4	**25**	abuse, attitude, belief, control, **healthcare professional**, hospital, institution, measure, public hospital, stage.
5	**22**	Africa, association, capacity, collaboration, education, improvement, leadership, **midwifery council**, midwifery education, midwifery workforce, professional association, professional development.
6	**22**	Health facility, inclusion, indicator, **regulation**, skills birth attendant, trust.
7	**21**	Ethnicity, prevalence, organization, **national policy**, organisation, primary care midwife, profession, screening, survey.
8	**8**	Antenatal care, AOR, gap, **midwifery practice**, use, skill birth attendance.

Figure 6 shows trending keywords entered between others like hospital, attitude, framework, experience, health system, stakeholder, profession, quality research, association, and integration.

A contribution to the topic focused on midwifery-related policy not only on service but also the view of the facilities' service on obstetrics, system health, association profession, and internal stakeholders' policy midwifery (Andrea Nove et al. 2017). Midwives show a proactive method and perceive shifts in the practice of midwifery as opportunities. They anticipate potential obstacles in the future, remain focused on identifying and enhancing suboptimal and moderate practices, and actively seek viable alternatives to carry out their work with maximum efficiency and effectiveness. Proactive midwives consistently rank the improvement of quality, the efficiency of their work, and the cultivation of a positive attitude to enhance the integrity of professional responsibilities (Moller et al. 2022).

Similarly, various research has analysed the policy governing midwifery (Touriño et al. 2021). This can have a global impact, providing valuable obstetric services for both the profession and society (Bukkfalvi-Cadotte 2020). Several factors have been associated with the description of professional obstetrics and the enhancement of quality service midwifery over long periods (Glasper 2017).

Various sub-periods from 2010 to 2022 have witnessed the development of scientific activities related to the topic, as evidenced by the accumulation of terms in titles, abstracts, and keywords in the sampled articles. VOSviewer has successfully identified diverse keywords, enabling the validation of the breadth of the research activity axis. Figure 7 shows that institutions, countries, and journals with the highest paper count or citation frequency predominantly originate from a specific country. This observation indicates the significance of exploring new experimental methods, as shown by the increasing attention given to certain methods in the research community (Osborne 2017).

Several topics of research related to midwifery suggested policy topics like professional development, registration, public health, and preference. These topics present a significant opportunity for researching midwifery policy. Previous research has extensively discussed linkages related to midwifery services, showing a rich area for exploration and research (Jolivet et al. 2021). Analysis opportunities can give several outlooks for practitioners' education to identify important directions (Webster 2013). Through a comprehensive analysis, it becomes evident that attention is given to topics of this nature (Hall and Way 2018).

The scope of the research was extensive, including a wide range of content and numerous research aspects, leading to a lack of focus. The research methodology covered a spectrum of methods, including qualitative, quantitative, and a combination of both. (World Health Organization 2021).

The research of related topics within midwifery policy has become a focal point in advancing knowledge in the field of midwifery. Bibliometric analysis results show that the characteristics of the field are broad and cross-disciplinary (Li et al. 2023).

Research of this nature will aid readers in comprehending the dynamic trends in topic development and the outcomes. This understanding identifies hot spots and focuses on research problems to pinpoint the most referenced and influential sources. Furthermore, it facilitates the selection of the most influential and relevant institutions for potential collaboration (Baruwa et al. 2021). The results of the analysis should show the main contributions of journals and their primary directions. This information can serve to inspire further research and encourage the development of scientific research in institutions, enhancing continued achievements in the field (Reynolds et al. 2020).

Figure 8 shows bibliometric analysis, capturing the evolution of research on midwifery policy over several years. The results analyse predominant topics and trends in research, including leading countries, organisations, and relevant sources such as journals (He et al. 2022).

The current results show that Australia holds a prominent global position in bibliometric analysis, primarily due to its substantial volume of publications and citations. This assessment includes collaborative writing, excerpts, bibliography compilati[22]. and co-authorship analysis. The journal "BMC Pregnancy and Childbirth" has the highest number of publications and citations compared to others, signifying its contribution to midwifery policy. In addition, the analysis of social network co-authorship distinguishes between strong and weak collaboration patterns, providing valuable insights into the collaborative dynamics. This evaluation proves essential for assessing the contributions of individual writers and the effectiveness of collaborative teams in advancing the research (Davidson et al. 2014). The results also show that establishing connections among writers within an analytical network leads to an increase in the quantity of cited papers.

The results show that Caroline SE Homer has garnered [19] the highest number of citations, with a total of 338 across 16 publications. This assessment is grounded in a comprehensive examination of bibliographies, collaborative writing endeavours, and shared citations.

Conclusion

In conclusion, this research was reported to use bibliometric analysis of midwifery policy publications through app.dimension.ai from 2010 to 2022. Am[20] the numerous publications on the subject, discernible upward trends were evident in the number of citations related to the topic. The link between midwifery policy and several other topics could be analysed using VOSviewer, namely network, overlay, and density visualisation.

This research showcased themes, trends, core journals, leading country ratings, and collaborations, as well as midwifery policy research groups. Furthermore, a systematic review of midwifery policy was provided over time. The research on trends of midwifery policy included hospitals, attitude, framework, experience, health system, stakeholders, profession, quality research, association, and integration. Topics related to midwifery policy were professional development, registration, public health, preference, AOR, and minutes. There was a close relationship between midwifery policy and various other elements, namely policy makers, midwifery units, patient safety, healthcare professionals, midwifery councils, regulations, national policy, and midwifery practices.

Regarding the limitations of this research, the app.dimensional.ai database was subjected to continuous updates with new publications being added periodically. Therefore, midwifery policy bibliometric analysis could be reviewed in the next few years. The analysis only extracted scientific article data from the app.dimension.ai database. Further research should consider incorporating additional databases to achieve a broader understanding of midwifery policy.

Acknowledgement

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