

Scope and content of care provided by midwives in Lower Saxony, Germany

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Summary

From a legal standpoint German midwives have a well established role in maternity care both in and outside hospital. All women have a right to be supported by a midwife during pregnancy, childbirth and the post natal period guaranteed by the insurance system. This is endorsed by the Directive on the recognition of professional qualification passed by the European parliament and the council. Despite these legal aspects there is a lack of data on the number of employed midwives as well as midwives working independently and their services-rendered. The study examines the scope and content of care provided by midwives in line with benefits of the insurance system as well as additional services. The sample of this regional survey is based on a total population drawn from a register of midwives in Lower Saxony, Germany. Project term: October 2006 until December 2008.

Background

Currently there is no adequate knowledge about the number of midwives as well as scope and content of midwifery care.

- ⇒ Maternity care provided by midwives is not part of the governmental health report published yearly.
- ⇒ Conclusions about needs in maternity care could only be drawn from clinical perinatal survey, hospital and insurance statistics.

Research Aims

- Development of a register of all midwives who worked in Lower Saxony in 2007
- Collection of information about the number of midwives in Lower Saxony in 2007 and the scope of care they provided
- Identification of additional services which were carried out by midwives beyond benefits of the insurance system

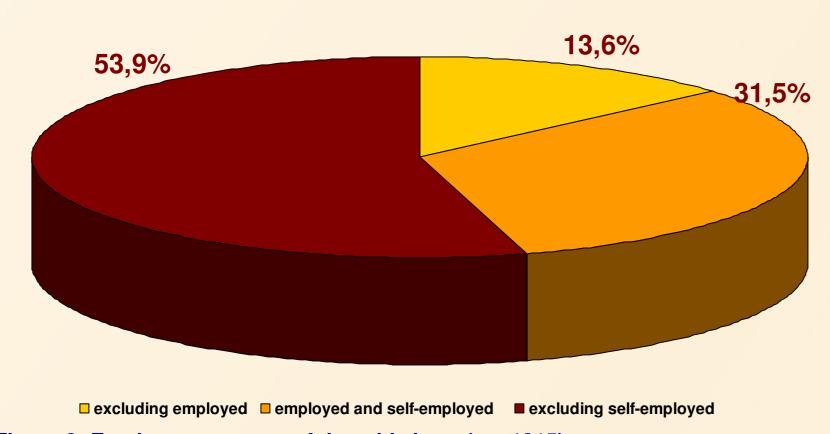
Methods

- Design: retrospectice regional survey
- Method: postal survey, questionnaire
- Target group: All midwives working and/or living in Lower Saxony in 2007

Preliminary analyses

- Development of a register of 2119 midwives working and/or living in Lower Saxony in 2007 (Fig. 1)
- Distribution of 2036 questionnaires based on an adjusted register (change of name, etc.) of midwives who worked and/ or lived in Lower Saxony in 2007
- Response rate: 70%

Figure 2-5 are based on a preliminary analyses of 1391 returned questionnaires



■ excluding employed ■ employed and self-employed ■ excluding self-employed ■ excluding self-employed (n = 1315)

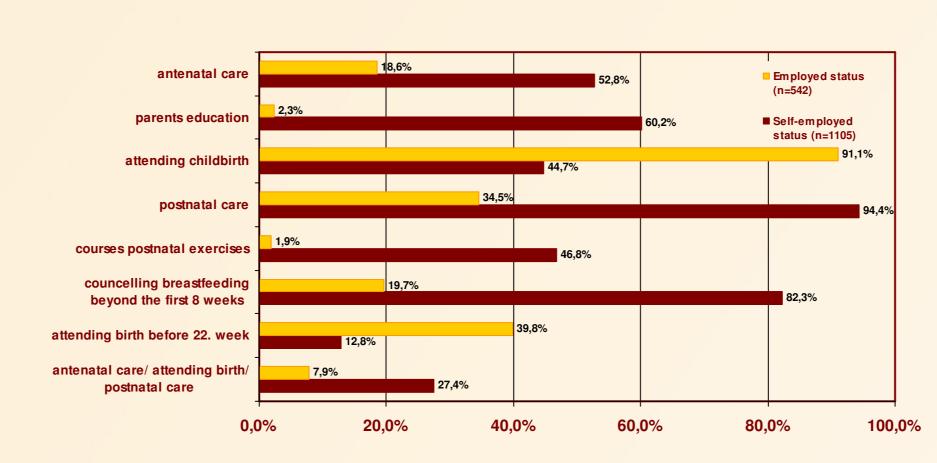
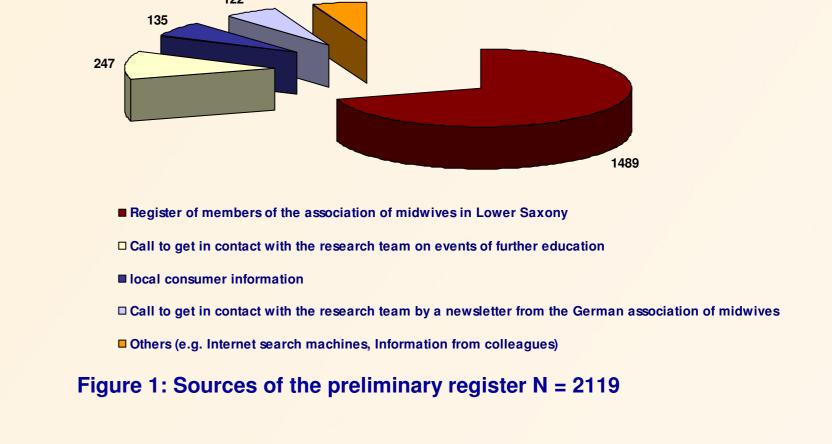


Figure 3: Scopes of midwifery care in reference to the employment status



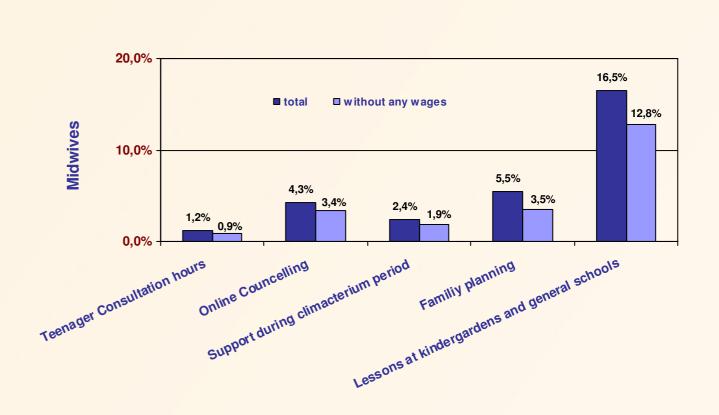
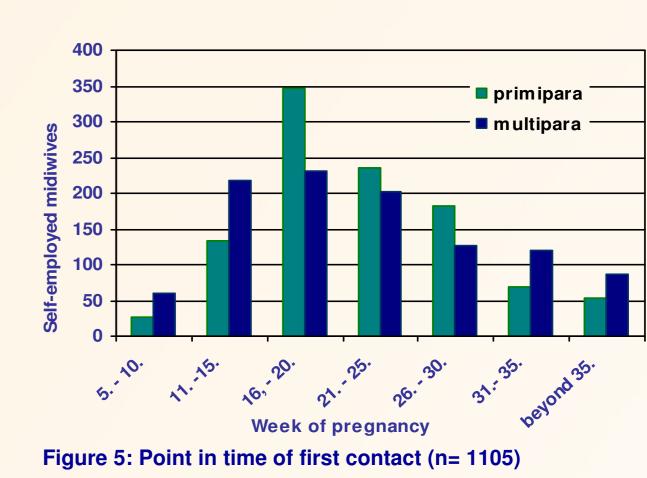


Figure 4: Selection of additional services (n = 1315)

- Conditions for a continuity of carer (providing antenatal care, birth attendance and postnatal care) seem to be limited (Fig. 3).
- There is a string of services midwives carried out which are not in line with benefits of the insurance system. Much of them without wages (Fig. 4).
- 25.2% of the self-employed midwives noted that multiparae get in contact to them for the first time during the first 15 weeks of pregnancy. The initial contact of primipara during the first 15 weeks of pregnancy is observed by 14.5% of the midwives (Fig. 5).



Concluding Points

Care provided by midwives is yet not being used to its full potential according to the legal framework in Germany. Midwives have to be asked which requirements should be met to make sure that women could experience a continuity of carer during pregnancy, childbirth and the postnatal period. Data on additional services relating to health promotion provided by midwives underscore the need to extend the services in this area. Regarding the different points in time of first contact of multi- and primipara, it appears in view of the data that primipara do not obtain enough information about care provided by midwives.

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