Valorisation
The findings of our research have important implications, not only for midwives, but also for the mothers and babies in their care. By concentrating on a hitherto under studied group (hospital midwives) our research brings new knowledge to the profession and can be used to benchmark the contribution of hospital midwives and to guide the development of policies that protect women and guide their care throughout pregnancy and birth.

Relevance

Maternity care in the Netherlands is changing. The strict delineation characteristic of the traditional model – where midwives cared for women with normal pregnancies at home and obstetricians attended to women with complications – is increasingly less defined. Over the last twenty years, the number of midwives in the employ of hospitals has grown rapidly. Hospital midwives now represent one third of all practising midwives in the Netherlands, bridging the gap between primary and hospital care. Despite their increased presence in the hospital, there has been almost no examination of the contribution of hospital midwives to maternity care.

Given the apparent desire of the government to replace the traditional form of maternity care in the Netherlands with a new integrated-care model, it is imperative, prior to change, that the contribution of each professional in the maternity care team is visible, heard and measured.

Existing research has focused on the views of primary care midwives\textsuperscript{1,2}, obstetricians\textsuperscript{3} and pregnant women\textsuperscript{4}. By describing the practice conditions, challenges, and opportunities faced by hospital midwives, this thesis makes a significant contribution to the body of knowledge regarding the professional groups that provide maternity care.

Our research serves as an important guide to developing policy for new models of maternity care. In these pages, we highlight the heretofore unacknowledged differences between hospital and primary care midwives and we provide evidence of what each group finds important about their work. These data offer a valuable benchmark for future studies of the profession and the maternity care system in the Netherlands.
Target groups

Our findings relate primarily to the diversity, practice conditions, and views of hospital midwives practising in the Netherlands. As such, our work will, first and foremost, be of interest to that group. Our studies of the job satisfaction of hospital midwives, their experienced autonomy, and their attitudes toward collaboration call attention to the differences between hospital and primary care midwifery. These data are critical for acknowledging the unique and important role of hospital midwives. Hospital midwives should take note of our findings, using them to help define their place within the maternity care framework and to ensure that their contribution is recognised.

However, because hospital midwives are only one piece of the larger puzzle of maternity care, our findings have significance for the other areas of maternity service provision, including primary care midwives, other members of the multidisciplinary maternity care team, insurers, regulators, and policymakers. By serving as an ‘aide memoire’ regarding the contribution of hospital midwives, our research can guide the work of policy makers and purchasers of maternity services in the Netherlands. And given the unique organization of maternity care in the Netherlands, our research – highlighting the contribution of midwives generally and hospital midwives in particular – will be of interest to a wider international audience.

Our study of diversity in the practice of hospital midwives is especially useful in focusing attention to the practice conditions of hospital midwives and has already informed debate surrounding the introduction of a new category of ‘clinical midwife’ to the registrant categories of the Dutch Healthcare Practitioners Law. Furthermore, our study of the content, quality, and availability of protocols in maternity care in the Netherlands found that up-to-date, high quality evidence may not be readily available to hospital midwives in the Netherlands, an issue that is of critical importance for the health of mothers and babies.

Finally, by measuring the contribution of hospital midwives, our findings can be used to generate discussion regarding the introduction of practice and audit standards for hospital midwives. This would help to provide additional safety and protection to mothers and babies in our care.
Innovative character of the study

Most studies of midwives and midwifery in the Netherlands focus on the place of birth or primary care midwives. We chose to study hospital midwives a relatively new, fast-growing, and under-researched group within the maternity care model of the Netherlands. As little evidence regarding hospital midwives practice existed prior to our study, we began with a survey measuring the scope, breadth, and depth of the contribution of this group to maternity care in the Netherlands. This was the first such study of Dutch hospital midwives. By looking at hospital midwives as a group, we were able to establish that there is a high level of diversity in the scope and practice of hospital midwives and that the aspects of their work that hospital midwives find to be important are not the same as those that primary care midwives find important.

In the Netherlands, all hospital midwives are employees, whereas most primary care midwives are self-employed. This dynamic has generated significant differences in how hospital and primary care midwives view (elements of) their job satisfaction as well as in how they experience collaboration with other members of the care team and how they see their autonomy as professionals.

Throughout our study we used quantitative methods, comparing the two groups of midwives with each other and also with other members of the multidisciplinary maternity care team. This offered a broad perspective from which we were able to make comparisons, test hypotheses, make assumptions, and draw conclusions regarding the contribution of hospital midwives. These measures have provided new knowledge regarding this group, contributing to the wider body of midwifery knowledge.

Activities

When we began our research, very little was known about the practice of hospital midwives in the Netherlands. As pioneers in this field, we have been able to disseminate our findings at a variety of local, national and international fora. We reached out to the community of hospital midwives through the clinical midwives group of Royal Dutch Organization of Midwives (KNOV), the Dutch midwives professional journal (TvV) and via conversation with students in the Master’s level clinical midwife physician assistant course (KV, MPA). We also have been involved in teaching sessions for student midwives and have
interacted with obstetricians and other professionals involved with maternity service provision in the Netherlands.

All five of the studies included in the dissertation have been published in internationally renowned, peer-reviewed journals. Details of these and other publications are found in the Appendix of this thesis.

Following the publication of this thesis we will continue to disseminate the new and important insights gained through this study, thereby helping to raise the profile of hospital midwives in the Netherlands. In addition, we will look for new (financial) opportunities to further examine issues raised by our study. We expect our findings will contribute to the continuing discourse within the profession over the future of hospital midwives.

References


