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The successes and challenges of 2020

The Impact of Midwives and the Impact of COVID 19 - New study launched

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On December 2nd 2020, ICM, Novametrics, UNFPA and WHO launched "The potential impact of midwives in preventing and reducing maternal and neonatal mortality and stillbirths: A Lives Saved Tool modelling study" (Nove et al., 2020). As one of the knowledge papers supporting the State of the World's Midwifery 2021 report which will be launched in May 2021, the study estimates the number of lives that could be saved under several 'scale-up' scenarios of care provided by professional midwives in 88 countries.



The analysis of the modelling study by Nove et al. (2020) showed the following results:

- 1. Relative to current coverage, a substantial increase of coverage of midwifedelivered interventions could avert 43% of maternal deaths, 39% of neonatal deaths and 26% of stillbirths = 2.2M deaths averted by 2035.
- 2. Even a modest increase in coverage of midwife-delivered interventions could avert 22% of maternal deaths, 23% of neonatal deaths, and 14% of stillbirths, equating to 13 million deaths averted per year by 2035.
- 3. Universal coverage would avert 67% of maternal deaths, 64% of neonatal deaths and 65% of stillbirths = 4.3M deaths averted by 2035.
- 4. Attrition of midwifery services would result in an increase of 551.000 additional deaths in the 88 countries used in this modelling exercise.

These deaths would mainly be averted in countries with large proportions of the world's population and high mortality rates. To help avert these deaths, midwives need the full set of International Confederation of Midwives (ICM) recommended competencies, a functional work environment, including efficient referral to next levels of care, and an effective, multidisciplinary Maternal Newborn Health (MNH) team.

These are astounding figures that help make the case for increased investment in midwifery. For low- and middle-income countries, making investment decisions on maternal and newborn health, and better understanding the dynamics around investing in midwives can make all the difference in the lives of women and families.

"These findings should leave no doubt in the minds of ministers of health, education and finance that midwife-led interventions have the potential to save the lives of women and their newborns at a massive scale"

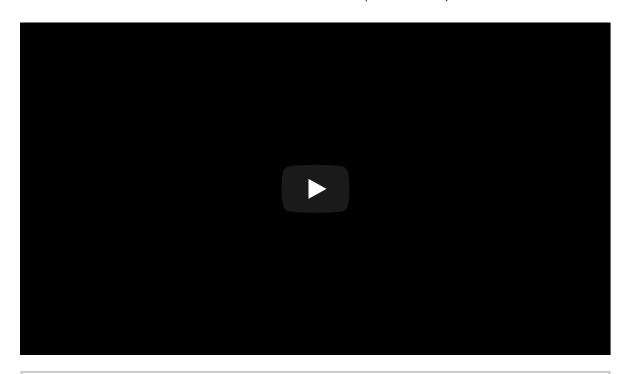
— Dr Elizabeth Iro, WHO Chief Nursing & Midwifery Officer

There are a number of pre-requisites that midwives would need to drive to their fullest potential

The potential of midwives is clear, but there are a number of pre-requisites to achieving those top-level percentages. In addition to possessing the full set of skills and International Confederation of Midwives (ICM) competencies, midwives need to be part of a team of care

providers that includes obstetrician gynaecologists, nurses and paediatricians, within a fully enabled work environment. For women to be able to access these services, the health system needs to reach to the far corners of a country and/or provide options for women to come closer to facilities during the last weeks of pregnancy.

At the above mentioned launch event, Dr Elizabeth Iro, the WHO Chief Nursing and Midwifery Officer, stated that "These findings should leave no doubt in the minds of ministers of health, education and finance that midwife-led interventions have the potential to save the lives of women and their newborns at a massive scale" (WHO, 2020)



Video: Impact of Midwives: A New Study Published in the Lancet Global Health

The Gap

In many countries, however, there is a serious lack of midwives. During this 'Year of the Nurse and the Midwife', WHO calculated that 'the world needs 9 million more nurses and midwives if it is to achieve universal coverage (WHO, 2020a). To strengthen nursing and improve nurses' education and working conditions, WHO launched the "State of the World's Nursing (SoWN) report" (WHO, 2020b). It recommends addressing the nursing challenges with health labour market and workforce policy levers; improving the analysis of national workforce data by using the National Health Workforce Accounts (NHWA) and creating forward-looking policy options to strengthen nursing capacity for the achievement of Universal Health Coverage.

Both the SoWN and the 2021 State of the World's Midwifery reports provide options for governments to strengthen their health workforce. In addition, the Year of the Nurse and Midwife focuses on strengthening nursing and midwifery, boosting their leadership and influence to improve services, and committing political will and funding in five key areas:

- Accelerate investments in nursing and midwifery education
- Employ more specialist nurses
- Invest in the leadership skills of nurses and midwives.
- Make midwives and nurses the heart of primary health care
- Support nurses and midwives in delivering health promotion and disease prevention.



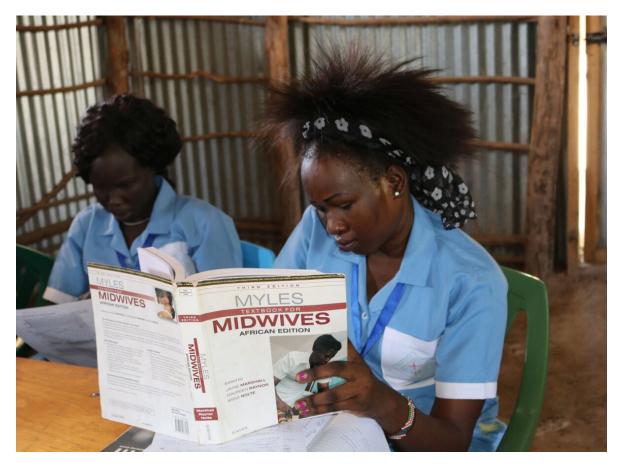
Myanmar Midwife Daw Nweni Cho visiting a pregnant lady in the Yangon River delta (2013). Photo: © Carine Weiss

The State of the World's Midwifery 2021 report, which is expected to be launched in May 2021, will include an analysis of the current progress and future challenges for effective coverage of sexual, reproductive, maternal, newborn and adolescent health workers and services — the SRMNAH workforce. It will show progress since 2011 and 2014; improve the evidence base for national policy dialogue; contribute to the monitoring of 'leaving no-one behind' and share the evidence for the impact of and return on investment for midwives on maternal and newborn health.

The Year of the Nurse and Midwife focuses on strengthening nursing and midwifery, boosting their leadership and influence to improve services, and committing political will and funding.

The impact of COVID-19 on health care workers

Sadly, the developments in the maternal and newborn health workforce reported above are at risk of being reduced by the impact of COVID on the nursing and midwifery workforce. Many midwives and nurses have been pulled from their regular posts into the forefront of the Coronavirus response where they risk contracting the infection, have to manage an increased workload with fewer colleagues and can expect a variety of effects on their mental health. As we know, for many nurses and midwives these working conditions are not new – they are used to dealing with inequalities, inadequate working conditions and excessive workloads (West, M. et al. 2020).



A trainee midwife during her classes, Lokichoggio. Photo: © Silvano Yokwe/Mission 21

Given the impact of COVID, WHO recommends the following measures to overcome the COVID challenges:

At individual level: Establish protocols to assure self-isolation and the safe return to work; provide training to midwives and nurses on infection control and use of PPE, and review the division of labour and reassign nurses and midwives with high risk;

At the institutional/organizational level: Perform regular risk assessments and develop surveillance protocols for those at risk of infection; increase decision making powers of nurses and midwives; psychosocial support.

At system level: Introduce new modalities for maintaining essential health services, such as telemedicine; underscore health system linkage to frontline healthcare workers such as nurses and midwives delivering essential services and COVID-19 roles in communities including

supply, referral & supervision.

As we near the end of 2020 and look back, we mourn the enormous loss of life that COVID has caused, including in the health workforce, but we must also appreciate the ingenuity, determination, persistence and stamina of the world's health care professionals who go beyond the call of duty almost every day to keep us safe, help us heal and support us when healing is no longer an option.

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