

# Midwifery and Addressing the Shortage of Maternal Care Providers

## Shortages in the Maternal Care Workforce

- In 2013, there were approximately 3.93 million US births, a number that is projected to be more than 4.4 million in 2050. The population of women over the age of 15 is expected to grow by 36 million in that same timeframe. (CDC Vital Stats data and Census Bureau population projections)
- In 2013, there were a total of four maternal care providers (CNMs/CMs and OB/GYNs) for every 10,000 women (age 15+) in the country. (American College of Obstetricians and Gynecologists and American Midwifery Certification Board).
- The number of medical school graduates entering OB/GYN residencies has remained essentially flat for three decades. There were 1,163 first year OB/GYN residents in 1979. In 2014, there were 1,221. (William F. Rayburn, MD, MBA, FACOG, "The Obstetrician Gynecologist Workforce in the United States: Facts, Figures, and Implications, American Congress of Obstetricians and Gynecologists, 2011.)
- The number of graduates from midwifery education programs (CNMs/CMs) has been growing, but absolute numbers are still small relatively to population needs. In 1979, there were 192 new CNM/CM certificants. In 2014, there were 576. (American Midwifery Certification Board).
- The character of the OB/GYN workforce has gone through a dramatic transformation in the last four decades. In 1975, only 15 percent of first year OB/GYN residents were women. In 2013, that figure was 82.6 percent.
  - Female and male physicians balance their professional and personal lives differently. Women work fewer hours, work part time more often and retire several years earlier. This has significant ramification for workforce capacity in the coming years. (Rayburn, 2011).
- For millions of women, shortages of maternity care providers can result in long wait times for appointments and long travel times to prenatal care and/or birthing sites. Prenatal care has an impact on incidence of low-birth weight and premature births, which can have life long repercussions and costs.
- In 2011, 40 percent of US counties had no CNM/CM or OB/GYN. (HRSA's Area Resource File)
- **ACOG has projected a shortage of between 15,723 – 21,723 OB/GYNs by 2050.**

## Midwifery's Role in the Solution

- CNMs/CMs specialize in fostering normal physiologic birth, which most women are able to experience.
- In 2013, CNMs/CMs attended 8.2% of all US births. (CDC Vital Stats) **CNMs/CMs could attend a larger proportion of normal physiologic births, freeing OB/GYNs to use their specialized skills to assist women with more significant complications.**
  - Two Cochrane reviews (2009 and 2013), a US systematic review of the literature (2012) and The Lancet (2014) have examined outcomes data associated with midwifery care and all endorsed the use of midwifery care as a core part of maternal care systems.
- Many countries make much more significant use of midwives. Typically, in the developed world, there are approximately 2.5 midwives per OB/GYN. (Midwifery in Europe: An Inventory in fifteen EU-member states," and Narumi Eguchi, "Do We Have Enough Obstetricians? – A survey of the Japan Medical Association in 15 countries," *JMAJ*, May/June 2009, vol. 52, no. 3, pp. 150-157.)
- Educating CNMs/CMs is relatively swift and cost effective. Educational programs typically require 2 years of post-baccalaureate graduate-level study and cost on average around \$54,000.



## Obstacles to Increasing the Nation's Midwifery Workforce

- **Midwifery education programs have consistently identified the challenge of securing a sufficient number of clinical sites for precepting student midwives as the primary bottleneck in the process of educating and preparing new CNMs/CMs.**
- Providers who agree to precept midwifery students consistently report that doing so reduces their productivity and thus their ability to generate income for their practice. They face the trade off of reducing their revenue or extending their work hours.
- Sixty-two percent of preceptors receive no remuneration in return for agreeing to take on this important responsibility. (Elaine Germano, CNM, DrPH, et al., "Factors that Influence Midwives to Serve as Preceptors: An American College of Nurse-Midwives Survey," *Journal of Midwifery & Women's Health*," Vol. 59, No. 2, March/April 2014, pp. 167-175.)
- A modest estimate of the cost to a preceptor site of taking on a single student is approximately \$6,000.

## Current Support for Midwifery Education

- In 2014, the National Health Service Corps (NHSC) provided funding to 40 CNMs through loan repayment or scholarship programs. Total NHSC spending on midwives during 2014 was \$1,978,257. This money is very helpful, but is directed to individuals and not their education programs and thus is not available to the programs to use for purposes of securing preceptor sites.
- **In 2014, the Graduate Nursing Education demonstration program was able to support preceptor sites for only 4 student midwives. Total support for these sites amounted to \$60,000.**
- There were approximately 2,400 midwifery students in 2014, for whom hundreds of preceptor sites are needed.

## What is Needed?

- **A minimal annual investment could offset preceptor site costs and help the nation's midwifery education programs prepare a sufficient number of midwives to meet what will be increasingly critical maternal care needs in the coming years.**
- ACNM will be presenting policymakers with specific recommendations regarding support for preceptor sites in the near future.

