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How Nurse-Midwives Can Help in Maternity Care Deserts

By <u>Terrey Hatcher</u> | October 13, 2022 4 minute read



Lack of access to care is a crucial factor in maternal mortality in the U.S., and a March of Dimes 2022 report found that 2.2 million women of childbearing age live in maternity care deserts. Integrating care from nurse-midwives into those areas can make a difference.

According to the report, *Nowhere To Go: Maternity Care Deserts Across the U.S.*, more than 146,000 babies were born in maternity care deserts. The designation refers to a county with a lack of maternity care resources, no hospitals or birth centers offering obstetric care, and no obstetric providers.

One of the actions recommended in the report is expanding access to and improving the integration of the midwifery model of care. "This can help improve access to equitable and culturally informed maternity care in under-resourced areas, lower costs, reduce unnecessary medical interventions that contribute to risks of maternal mortality and morbidity," and more, according to the study's researchers.

Lack of access to quality maternal care

Researchers asserted that obstetricians (OBs), certified nurse-midwives (CNMs), and family physicians can all provide "quality maternal care." Yet 39.8% of counties lack a single OB or CNM, and "capacity for midwives in rural areas has potentially been underutilized."

In a <u>press release</u> about the new report, Zsakeba Henderson, MD, March of Dimes Senior Vice President and Interim Chief Medical and Health Officer, said, "Our 2022 report confirms lack of access to care is one of the biggest barriers to safe, healthy pregnancies and is especially impacting rural areas and communities of color where families face economic strains in finding care."

"We have struggled with a maternal mortality crisis for more than three decades," observed Lora Sparkman, MHA, BSN, RN, in a blog discussing <u>efforts to improve maternal outcomes</u>. Sparkman, who is Relias' Vice President and Partner, Clinical Solutions, Patient Safety and Quality, noted that despite advancements, "The U.S. maternal mortality rate remains stubbornly high, at 17.4 deaths per 100,000 live births."

CNMs can bring life to maternity care deserts

With maternity care deserts making up 36% of all U.S. counties, improving access to care and reducing the maternal mortality rate will require far-reaching efforts including changing policies, educating providers, addressing social determinants of health, providing technological support, and expanding access to midwifery care.

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"Having CNMs in these known underserved areas would be a lifeline to these mothers," Sparkman noted.

"Not only would they provide evidence-based care, but they could direct and coordinate appropriate levels of care for mothers who are at a higher risk for birth-related complications," she said.

According to the 2022 March of Dimes report, previous research identified the following benefits to using a midwife during pregnancy and postpartum periods: "Midwifery care has been associated with an increased chance of having a low-intervention birth and lower cost of care due to significantly lower odds of medical intervention. Additionally, it has been associated with possible reduction of preterm birth and other adverse birth outcomes."

CNM salary and practice stability

Across healthcare, retention of clinicians has been a challenge amid the pandemic, and CNM workforce issues are clearly a factor in access to care. A <u>study in the *Journal of Midwifery and Women's Health*</u> done in fall 2020 found that full-time equivalent positions and the number of full-time midwives were stable for 77% of the practices in the study, which covered all 50 states and the District of Columbia. Of the remaining practices, 15% lost and 8% gained full-time positions.

Notably, researchers found that ownership of the practice by a midwife was significantly associated with increased salaries, decreased loss of benefits, and lower incidence of furloughs. One nurse-midwife, Aiyana Davison, CNM, WHNP, RN, discussed the satisfaction that comes with being a CNM in a <u>Nurse.com interview</u>. She said that her duties "go far beyond the birthing experience" because she has been able to educate, bond, and grow with her patients and their families.

"I also witness great challenges when patients are dismissed or neglected in healthcare because of race, sexual preferences or identity, religious beliefs, or life morals and values," said Davison.

"It's crucial to let my patients and their families know they matter, and I will provide them with the best care I can offer."

The American College of Nurse-Midwives (ACNM) provides information on <u>midwifery</u> <u>education programs</u> and advocates for the profession's impact on maternal and women's health.

"The evidence supporting midwives and midwifery-led care is vast and centering the voices and value of advanced practice midwives in public health and policy discussions is integral to improving our country's alarming maternal mortality and morbidity outcomes," ACNM Chief Executive Officer Katrina H. Holland said in a press release celebrating National Midwifery Week earlier this month. "Better integration of midwives onto care teams and within health systems leads to improved care, reduced cost, and patient satisfaction."

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