

# **MIDWIFERY EDUCATORS** SURVEY

During the 2016/17 academic year, we asked midwifery educators about their health, safety, and wellbeing of work.<sup>1</sup> The results were troubling. Educators were facing increasing workloads and high stress levels. In 2019/20, we repeated the survey to determine whether educators' position had improved.<sup>2</sup> Unfortunately, it seems the situation has worsened.

## HEALTH AND WELLBEING AT WORK

#### Workload

80% of midwifery educators agreed they felt overwhelmed by the amount of work they had to do

# 76% of educators

agreed there were not enough staff in their organisation to enable them to do their job properly (up from 70% in 2017)

# **44%** of educators

agreed they felt that however hard they worked; it was never good enough

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#### **Stress**

95% of educators report feeling stressed every day, most days, or some days 48% almost half of educators agree there is friction

and anger between colleagues



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FEEL

OVERWHELMED

#### Wellbeing



well enough to perform their duties **59%** of 94% educators were 91% constantly worried about the impact of their absence on their workload 2020 2017 when absent. up from **47%** in 2017



## **NEGATIVE EXPERIENCES AT WORK**





In **31%** of instances, educators were discriminated against by respondents' managers, **33%** by colleagues, **25%** by students, and **11%** by members of the public. Only **25%** of educators reported the discrimination.

 Royal College of Midwives (2017) Survey results about the health, safety and wellbeing of midwives working in education. Available at: https://www.rcm.org.uk/media/2956/caringfor-you-survey-results-midwives-working-in-education.pdf

2 This survey ran from 3 August 2020, to 21 September 2020. We received 176 responses, which accounts for almost one third or 29% of midwifery educators in the United Kingdom Employing a 95% confidence interval, there is a 6% margin of error.



Heavy workloads, high stress, and frequent instances of bullying, harassment, and discrimination are taking a toll.



Midwifery educators wanting to leave their organisation as soon as possible



Midwifery educators feeling that they could continue working in midwifery education until retirement

#### **IMPACT OF THE PANDEMIC**





spent more time caring for others



felt the pandemic has had a negative impact on their mental health



# **MIDWIFERY EDUCATORS** SURVEY

## **DISCUSSION AND RECOMMENDATIONS**

With more than 50% of educators belonging to the 50-65-year age group, and only 46% reporting they feel they could remain in the profession until retirement, urgent action is needed to attract and retain new midwifery educators.<sup>3</sup> In the intervening period, additional support will be required to help midwives to cope with heavy workloads and unacceptable levels of stress. In addition, an increasing body of evidence demonstrates that students benefit from having educators that look like them.<sup>4</sup> As such, urgent action is also needed to address the lack of diversity amongst midwifery educators.<sup>5</sup>



Midwifery educators fulfil an extraordinarily important role, if lack of resources and support means they cannot do their jobs, students' education suffers. The following actions are recommended:

- Significantly increase investment in midwifery education.
- Increase administrative and pastoral support for midwifery educators who are experiencing unacceptable levels of stress.
- Fully implement the Council of Deans recommendations with respect to workforce strategy, recruitment, careers, diversity, and research, including in particular:
- o When developing workforce plans for the NHS that include an increase in the number of students on healthcare courses, be mindful of the importance and constraints of the academic workforce in delivering these courses
- o Raise awareness among stakeholders of the urgent need to attract more people into academic careers in nursing, midwifery and allied health disciplines.
- o Create campaigns to promote healthcare careers which include career pathways in education and research.
- o Monitor developments in the demographic and skills profile of the healthcare academic workforce.
- o Invest in leadership development, especially for academics from underrepresented groups.
- o Ensure that departments have the resources to develop and implement action plans to foster race equality.

### WE ALSO RECOMMEND THAT THE COUNCIL **OF DEANS:**

- Conduct further research to determine why instances of bullying, harassment and discrimination are so common, and what can be done to support educators' who have these experiences and to increase reporting rates.
- Conduct further research to determine the cause of the lack of diversity amongst midwifery educators to ensure better diversity amongst midwifery educators in the future.

<sup>3</sup>Similar findings have been made by the Council of Deans most recent survey: Council of Deans (2019) The academic workforce in health faculties. Available at: https://councilofdeans.org.uk/wpcontent/uploads/2020/01/CODH.ASC.report\_v4.pdf

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<sup>4</sup>Institute of Labor Economics (2017) The Long-Run Impacts of Same-Race Teachers. Available at: http://ftp.iza.org/dp10630.pdf