



University of Colorado **Anschutz Medical Campus**

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Midwives are burned out - for surprising reasons

Study says poor leadership, lack of support and autonomy – not long hours – key factors in burnout

AURORA, Colo. (December 17, 2021) – A new study indicates 40% of midwives in the United States are burned out or stressed and exhausted, putting them at risk for making medical errors and missing necessary patient care. Burnout also leads to less professional engagement, reduced productivity, absenteeism and resignations, according to new research published in the leading journal, [*Health Services Research*](#).

Almost a third of all certified nurse-midwives and certified midwives in the United States participated in the study—making it one of the largest burnout studies of a single profession ever conducted. In [the study](#), midwives reported a higher rate of burnout than maternity nurses and about the same levels of stress as OB/GYNs. However, “Our findings indicate that a supportive practice climate, specifically effective leadership, organizational participation and supporting the unique perinatal care provided by midwives, is essential to burnout prevention,” wrote lead author Brie Thumm, PhD, CNM, RN, MBA, FACNM, assistant professor at the University of Colorado College of Nursing.

While many speculate that the stress and exhaustion are due to working long hours or having too many patients, the researchers actually found the predictors of burnout to be poor leadership and support. Midwives cited a lack of professional recognition, staff and resources, control over clinical practice and practice autonomy, and a negative work environment. But researchers also found reason for optimism. They say those problems can be fixed with cost-effective, straightforward changes in the practice environment.

“Workforce development initiatives should therefore aim to cultivate midwifery leadership and ensure there is a midwife on key decision-making committees to drive how we care for pregnant people and their families,” she wrote.

Another predictor of burnout identified by the researchers was a lack of support for the midwifery model of care. Midwifery care puts the birthing person in the center of the care team with shared decision making and promotes low-intervention birth. Midwifery care is associated with lower rates of cesarean birth, pre-term birth, low birth weight infants, and neonatal mortality. Therefore, strategies to prevent burnout can also improve birth outcomes, the authors conclude.

Critical to health care

The study was the first investigation of midwifery burnout in the U.S. since 1986. The researchers include Dr. Thumm and Denise Smith, PhD, CNM, FACNM both from CU Nursing, Allison Squires, PhD, RN, FAAN of New York University Rory Meyers College School of Nursing; Ginger Breedlove, PhD, CNM, APRN, FACNM, FAAN of Grow Midwives; and Paula Meek, RN, PhD, FAAN, ATSF of the University of Utah College of Nursing. The research was part of Thumm's graduate dissertation. Data was collected by anonymously surveying midwives around the United States.

Shortage of maternity care providers

The finding that two in five midwives are burned out is significant. With an increasing [shortage](#) of maternity care providers around the US, midwives are needed more than ever to fill a gap in the workforce. Nearly half of all of the counties in the US don't have any maternity care providers, according to the report. The midwifery workforce can also reduce the workload on physicians and their levels of burnout.

Yet today, only 13,000 Certified Nurse-Midwives attend [9.8% of births nationwide](#). The study highlights that many of those remaining midwives are burned out and thinking of quitting.

“Increasing the numbers of practicing midwives is an important strategy toward correcting access to care issues and improving maternal health outcomes. However, midwifery burnout is a barrier to growing the midwifery workforce, and is associated with workforce instability and adverse patient outcomes,” the researchers wrote.

No evening anxiety

Not all of the midwives in the study were dissatisfied with their jobs. Midwives who worked mostly nights were happier than those who worked any time during the day. The researchers suggest that's because evening workers have more autonomy and deal with fewer competing work obligations like meetings and outpatient care. In fact, the more time midwives spent with the patients, the survey found the less stressed out they were. Midwives attending births at home where they have more time with patients were more content in their work compared to midwives attending births in other settings.

With their findings, the researchers encourage policy makers and administrators to invest in better practices that support the midwifery model of care, including midwives in decision-making, and improving staffing and support from colleagues. Those kinds of simple changes could relieve their stress, prevent them from leaving the workforce, and encourage others to become midwives to create a robust U.S. midwifery workforce to improve maternal health care.

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