

## Networking of independent midwives in Switzerland

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### Background

In Switzerland, numerous children grow up under socially disadvantaged conditions, hindering them to get the best possible start in life (1). Supported by the National Program against Poverty, interdisciplinary networks for early childhood support are increasingly being set up in cantonal or community-related initiatives. Independent midwives are often engaged in support networks of this kind. However, we do not know much about their engagement and their experience with networking activities.

### Objectives

The aim of this study was to analyze the forms and extent of engagement of independent midwives in networks for early childhood support and how they perceive their engagement.

### Methods

An online survey was conducted with N=401 independent midwives in Switzerland (response rate: 29.1%). The socio-demographic data were analyzed with descriptive statistics (Chi-square tests and Cramer's-V). The study was positively approved by the Ethics Committee of the Canton of Zurich.

### Findings

62.4% of the participating midwives were engaged in networks: 31.2% in mono-professional (mon.) and 31.2% in interdisciplinary (int.) networks. Midwives engaged in networks (NW) indicate to care significantly more frequently for socially disadvantaged families (on a regular base: 16.9% vs. 9.2%,  $p < 0.001$ ). Moreover, midwives in urban areas are more likely to care *occasionally, regularly* and *frequently* for disadvantaged families than their colleagues in rural areas (Figure 1).

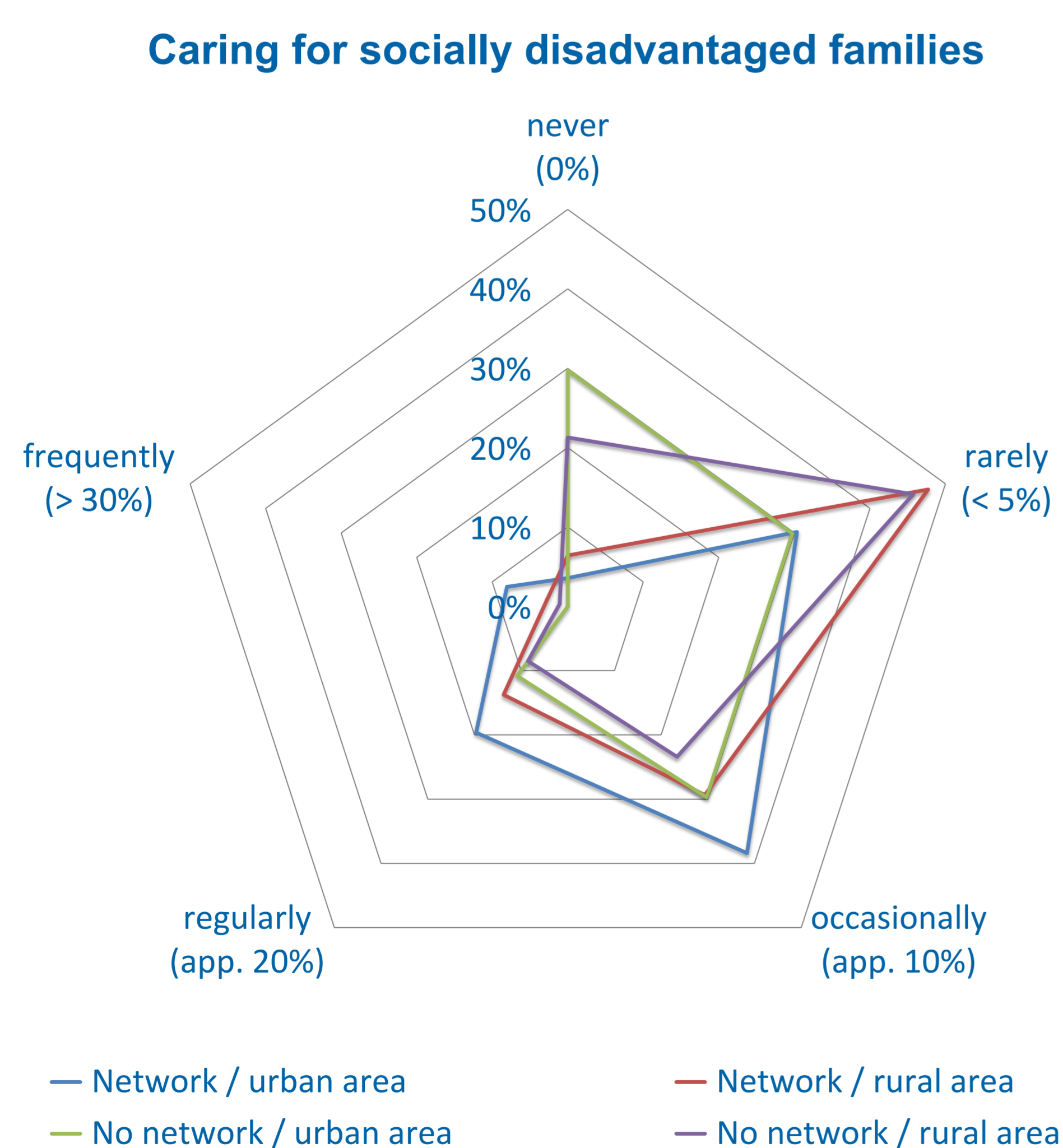


Figure 1. Caring for socially disadvantaged families by region of activity and network engagement of midwives

Compared to the other variants/cases, midwives engaged in interdisciplinary networks expressed more frequently that they feel supported in the assessment of the families by regular interdisciplinary exchange ( $\bar{x}$  NW 48.8%, mon. NW 50.5% vs. int. NW 66.3%,  $p = 0.038$ ). In the event of an extended need for support for the family, midwives in interdisciplinary networks can more often rely on an already established network ( $p = 0.001$ ) or well-known contacts ( $p < 0.001$ ). Interdisciplinary involved midwives are more likely to see the advantage of network engagement such as being able to gain a better understanding of the perspectives and attitudes of practitioners from other professions ( $p = 0.001$ ) and see families with complex problems being supported more comprehensively ( $p = 0.001$ ). In addition, they see the value of their own work as being better used for disadvantaged families ( $p = 0.029$ ) (Figure 2).

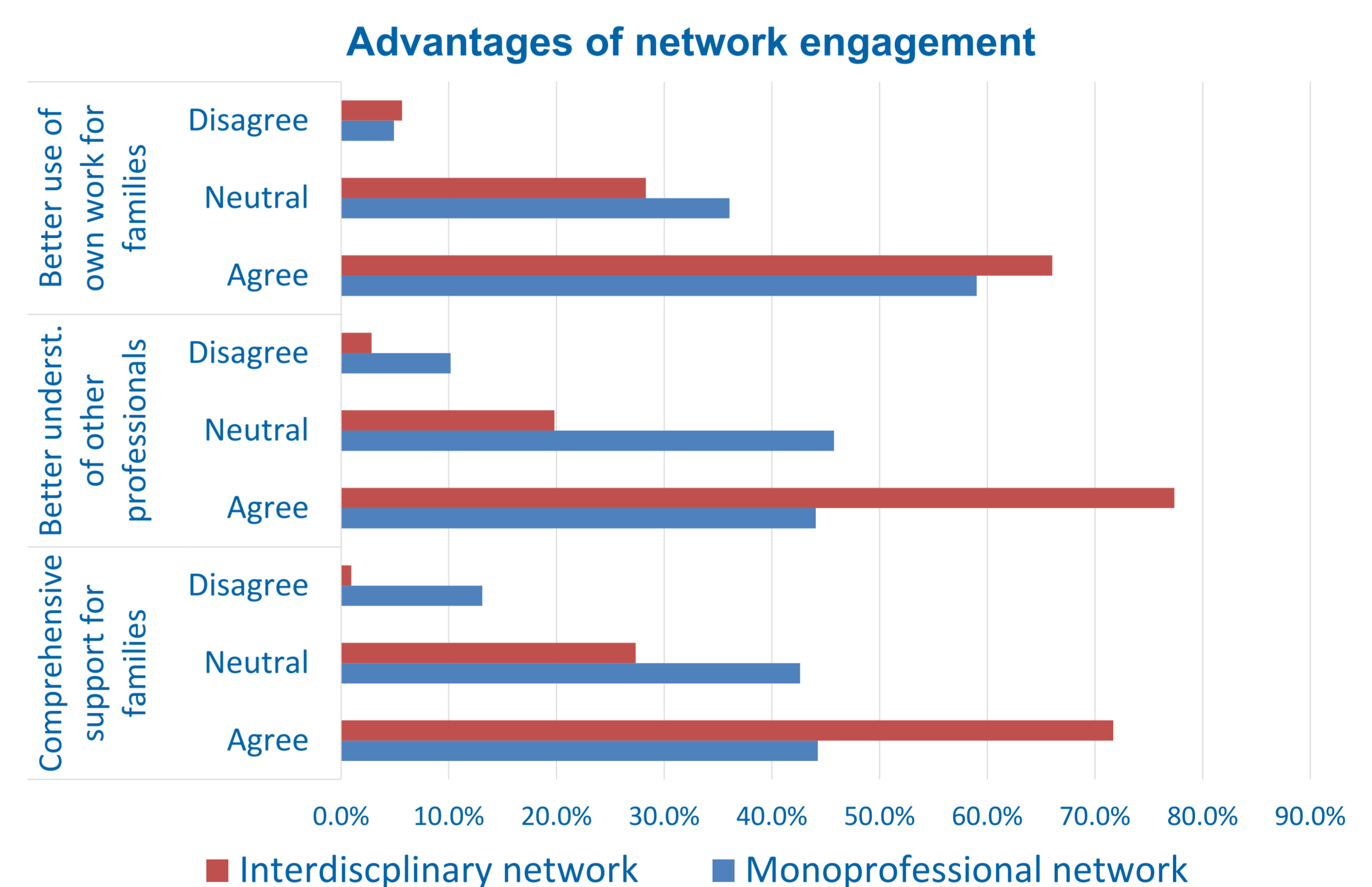


Figure 2. Advantages of network engagement of midwives involved in interdisciplinary or mono-professional networks

### Conclusion

The results suggest that socially disadvantaged families as well as midwives themselves benefit from the engagement of midwives in (interdisciplinary) networks. The engagement of midwives in networks goes hand in hand with a better access of socially disadvantaged families to midwifery care.

### Funding

National Program against Poverty, Family Start Zurich

### References

(1) Zettlin J, Mohangoo A, Delnord M (eds). European Perinatal Health Report: Health and care of pregnant women and babies in Europe in 2010. EURO-PERISTAT; 2012. Available from: <http://www.europeristat.com/reports/european-perinatal-health-report-2010.html>.

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