

# “The meat in the sandwich” Midwives’ experiences supporting Women’s Safety and Autonomy

## AIM

A foundational aspect of midwifery is partnering with birthing women to provide safe and compassionate care that enables informed decision-making. The aim of this study was to explore how midwives communicate concern to support women’s autonomy and safety during labour and birth.

## METHOD

A mixed-method study design consisting of quantitative and qualitative studies was used. This consisted of a self-administered questionnaire, followed by focus-group discussions with registered midwives.

## FINDINGS

Data from the questionnaire was used to determine how often midwives encountered safety concerns and ethical issues in their practice and explore whether and how they were voiced. Of 240 potential study participants 65 (27%) completed the questionnaire. A failure to provide informed consent was the most frequently witnessed breach in professional and ethical standards. Seventy percent of midwives surveyed who witnessed concerns for safe care did speak to someone. However, only 12% spoke explicitly to the person they deemed most responsible for the breach and fully expressed their concerns.

Three intertwining themes of woman-centred care; inter-professional relationships and advocacy emerged from the qualitative data which encompass the core phenomenon of ‘the meat in the sandwich’. This core incorporates the complexities faced by midwives when navigating conversations and concerns about women’s safety and autonomy.

## CONCLUSIONS

A fundamental principle of health-service governance is to foster a culture in which staff feel safe to raise concerns. However, the failure to communicate concerns is a well-recognised safety problem in maternity care. Knowing the right thing to do is necessary, but not sufficient, for actually doing it. This report provides insights into interconnecting factors that influence midwives’ preparedness to communicate ethical and practice concerns and explores enablers to improving communication and shared decision making.

## KEYWORDS

Safety; consent; advocacy; midwifery; birth.



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