

# 2022 Midwifery Workforce Survey and Non-Practising Survey

The midwifery workforce survey information is collected from all midwives who apply for a practising certificate, as part of the online application process. The 2022 survey is for midwives who held a practising certificate on 12 May 2022. Most responses were collected in February and March 2022.

This report sets out the results of the survey questions, gives the responses in table and chart form.

Midwives are also able to complete a survey if they have decided not to renew their practising certificate and complete the online process to change their status to non-practising. The analysis of this data is presented separately at the end of the report.

This report is intended to provide feedback to the profession and will be forwarded to the Ministry of Health.

Date of publication 29 July 2022

## **Contents**

CONTENTS - FIGURES       3         DEMOGRAPHICS       5         Total number of midwives renewing practising certificates       5         Gender       5         Ethnicity       6         Time in workforce       9         Returned to practise       9         Not currently practising       10         WORKING ARRANGEMENTS       11         Work situation       11         Employer type       12         Working hours       16         Working part time       18         QUALIFICATIONS       18         First midwifery qualification       19         Completed study last year – completed qualification       19         Completed study last year – completed qualification       19         Nursing registration       20         NON PRACTISING MIDWIVES       21         Returning to practise       21         Midwives who completed the non-practising survey had the option of stating whether they intended to return to practice in the future       22         Age groups       22	CONTENTS - TABLES	3
Total number of midwives renewing practising certificates       5         Gender       5         Ethnicity       6         Time in workforce       9         Returned to practise       9         Not currently practising       10         WORKING ARRANGEMENTS       11         Work situation       11         Employer type       12         Work geographical location       14         Working hours       16         Working part time       18         QUALIFICATIONS       18         First midwifery qualification       18         Current study – expected qualification       19         Completed study last year – completed qualification       19         Nursing registration       20         NON PRACTISING MIDWIVES       21         Returning to practise       21         Midwives who completed the non-practising survey had the option of stating whether they intended to return to practice in the future       21	CONTENTS - FIGURES	3
Gender       5         Ethnicity       6         Time in workforce       9         Returned to practise       9         Not currently practising       10         WORKING ARRANGEMENTS       11         Work situation       11         Employer type       12         Work geographical location       14         Working hours       16         Working part time       18         QUALIFICATIONS       18         First midwifery qualification       18         Current study – expected qualification       19         Completed study last year – completed qualification       19         Non practising midwives       20         NON PRACTISING MIDWIVES       21         Returning to practise       21         Midwives who completed the non-practising survey had the option of stating whether they intended to return to practice in the future       21	DEMOGRAPHICS	5
Ethnicity       6         Time in workforce       9         Returned to practise       9         Not currently practising       10         WORKING ARRANGEMENTS       11         Work situation       11         Employer type       12         Work geographical location       14         Working hours       16         Working part time       18         QUALIFICATIONS       18         First midwifery qualification       19         Current study – expected qualification       19         Completed study last year – completed qualification       19         Nursing registration       20         NON PRACTISING MIDWIVES       21         Returning to practise       21         Midwives who completed the non-practising survey had the option of stating whether they intended to return to practice in the future       21	Total number of midwives renewing practising certificates	5
Time in workforce	Gender	5
Returned to practise       9         Not currently practising       10         WORKING ARRANGEMENTS       11         Work situation       11         Employer type       12         Work geographical location       14         Working hours       16         Working part time       18         QUALIFICATIONS       18         First midwifery qualification       19         Current study – expected qualification       19         Completed study last year – completed qualification       19         Nursing registration       20         NON PRACTISING MIDWIVES       21         Returning to practise       21         Midwives who completed the non-practising survey had the option of stating whether they intended to return to practice in the future       21	Ethnicity	6
Not currently practising       10         WORKING ARRANGEMENTS       11         Work situation       11         Employer type       12         Work geographical location       14         Working hours       16         Working part time       18         QUALIFICATIONS       18         First midwifery qualification       19         Current study – expected qualification       19         Completed study last year – completed qualification       19         Nursing registration       20         NON PRACTISING MIDWIVES       21         Returning to practise       21         Midwives who completed the non-practising survey had the option of stating whether they intended to return to practice in the future       21	Time in workforce	9
WORKING ARRANGEMENTS       11         Work situation       12         Employer type       12         Work geographical location       14         Working hours       16         Working part time       18         QUALIFICATIONS       18         First midwifery qualification       18         Current study – expected qualification       19         Completed study last year – completed qualification       19         Nursing registration       20         NON PRACTISING MIDWIVES       21         Returning to practise       21         Midwives who completed the non-practising survey had the option of stating whether they intended to return to practice in the future       21	Returned to practise	9
Work situation	Not currently practising	10
Employer type       12         Work geographical location       14         Working hours       16         Working part time       18         QUALIFICATIONS       18         First midwifery qualification       19         Current study – expected qualification       19         Completed study last year – completed qualification       19         Nursing registration       20         NON PRACTISING MIDWIVES       21         Returning to practise       21         Midwives who completed the non-practising survey had the option of stating whether they intended to return to practice in the future.       21		
Work geographical location	Work situation	11
Working hours	Employer type	12
Working part time	Work geographical location	14
QUALIFICATIONS	Working hours	16
First midwifery qualification	Working part time	18
Current study – expected qualification		
Completed study last year – completed qualification	• •	
NON PRACTISING MIDWIVES		
NON PRACTISING MIDWIVES		
Returning to practise	Nursing registration	20
Midwives who completed the non-practising survey had the option of stating whether they intended to return to practice in the future 21		
intended to return to practice in the future21	• •	

## **Contents - Tables**

Table 1	Gender
Table 2	Age
Table 3	Ethnic group
Table 4	All Ethnicities
Table 5	Years in practice as a midwife
Table 6	Reason for return to practice
Table 7	Reasons for not currently practising
Table 8	Primary, secondary and third work types
Table 9	Primary, secondary and third work groups
Table 10	Primary, secondary and third employer type
Table 11	Primary work area region – number of midwives
Table 12	Primary, second and third DHB work area
Table 13	Hours per week – primary, secondary and third work type
Table 14	Hours per week in all situations combined
Table 15	Reason for working part time
Table 16	First midwifery qualification
Table 17	Current study – qualification type
Table 18	Completed qualification last year – qualification type
Table 19	Completed qualification last year – primary ethnicity
Table 20	Completed qualification last year – Major/Speciality
Table 21	Completed qualification last year – qualification provider
Table 22	Midwives on a nursing register or roll and midwives who will apply for a nursing PC this year
Table 23	Influencing factors for Returning to Practice
Contents -	
Figure 1	Timelapse of midwives with practising certificates
Figure 1 Figure 2	Timelapse of midwives with practising certificates  Age of practising midwives
Figure 1 Figure 2 Figure 3	Timelapse of midwives with practising certificates  Age of practising midwives  Ethnicity over time
Figure 1 Figure 2 Figure 3 Figure 4	Timelapse of midwives with practising certificates  Age of practising midwives  Ethnicity over time  Ethnicity group by primary, secondary and third
Figure 1 Figure 2 Figure 3 Figure 4 Figure 5	Timelapse of midwives with practising certificates  Age of practising midwives  Ethnicity over time  Ethnicity group by primary, secondary and third  Years in practice as a midwife
Figure 1 Figure 2 Figure 3 Figure 4 Figure 5 Figure 6	Timelapse of midwives with practising certificates  Age of practising midwives  Ethnicity over time  Ethnicity group by primary, secondary and third  Years in practice as a midwife  Reason not currently practising
Figure 1 Figure 2 Figure 3 Figure 4 Figure 5 Figure 6 Figure 7	Timelapse of midwives with practising certificates  Age of practising midwives  Ethnicity over time  Ethnicity group by primary, secondary and third  Years in practice as a midwife  Reason not currently practising  Primary, secondary and third work types
Figure 1 Figure 2 Figure 3 Figure 4 Figure 5 Figure 6 Figure 7 Figure 8	Timelapse of midwives with practising certificates  Age of practising midwives  Ethnicity over time  Ethnicity group by primary, secondary and third  Years in practice as a midwife  Reason not currently practising  Primary, secondary and third work types  Primary, secondary and third work groups
Figure 1 Figure 2 Figure 3 Figure 4 Figure 5 Figure 6 Figure 7 Figure 8 Figure 9	Timelapse of midwives with practising certificates  Age of practising midwives  Ethnicity over time  Ethnicity group by primary, secondary and third  Years in practice as a midwife  Reason not currently practising  Primary, secondary and third work types  Primary, secondary and third work groups  Primary, secondary and third employer groups
Figure 1 Figure 2 Figure 3 Figure 4 Figure 5 Figure 6 Figure 7 Figure 8 Figure 9 Figure 10	Timelapse of midwives with practising certificates  Age of practising midwives  Ethnicity over time  Ethnicity group by primary, secondary and third  Years in practice as a midwife  Reason not currently practising  Primary, secondary and third work types  Primary, secondary and third work groups  Primary, secondary and third employer groups  Timelapse of midwives working in an educational institute by primary ethnicity
Figure 1 Figure 2 Figure 3 Figure 4 Figure 5 Figure 6 Figure 7 Figure 8 Figure 9 Figure 10 Figure 11	Timelapse of midwives with practising certificates  Age of practising midwives  Ethnicity over time  Ethnicity group by primary, secondary and third  Years in practice as a midwife  Reason not currently practising  Primary, secondary and third work types  Primary, secondary and third work groups  Primary, secondary and third employer groups  Timelapse of midwives working in an educational institute by primary ethnicity  Summary of DHB area
Figure 1 Figure 2 Figure 3 Figure 4 Figure 5 Figure 6 Figure 7 Figure 8 Figure 9 Figure 10 Figure 11 Figure 12	Timelapse of midwives with practising certificates  Age of practising midwives  Ethnicity over time  Ethnicity group by primary, secondary and third  Years in practice as a midwife  Reason not currently practising  Primary, secondary and third work types  Primary, secondary and third work groups  Primary, secondary and third employer groups  Timelapse of midwives working in an educational institute by primary ethnicity  Summary of DHB area  Primary DHB work area
Figure 1 Figure 2 Figure 3 Figure 4 Figure 5 Figure 6 Figure 7 Figure 8 Figure 9 Figure 10 Figure 11 Figure 12 Figure 13	Timelapse of midwives with practising certificates  Age of practising midwives  Ethnicity over time  Ethnicity group by primary, secondary and third  Years in practice as a midwife  Reason not currently practising  Primary, secondary and third work types  Primary, secondary and third work groups  Primary, secondary and third employer groups  Timelapse of midwives working in an educational institute by primary ethnicity  Summary of DHB area  Primary DHB work area  Hours per week by primary, secondary and third work types combined
Figure 1 Figure 2 Figure 3 Figure 4 Figure 5 Figure 6 Figure 7 Figure 8 Figure 9 Figure 10 Figure 11 Figure 12 Figure 13 Figure 14	Timelapse of midwives with practising certificates  Age of practising midwives  Ethnicity over time  Ethnicity group by primary, secondary and third  Years in practice as a midwife  Reason not currently practising  Primary, secondary and third work types  Primary, secondary and third work groups  Primary, secondary and third employer groups  Timelapse of midwives working in an educational institute by primary ethnicity  Summary of DHB area  Primary DHB work area  Hours per week by primary, secondary and third work types combined  Hours per week, all work types combined
Figure 1 Figure 2 Figure 3 Figure 4 Figure 5 Figure 6 Figure 7 Figure 8 Figure 9 Figure 10 Figure 11 Figure 12 Figure 13 Figure 14 Figure 15	Timelapse of midwives with practising certificates  Age of practising midwives  Ethnicity over time  Ethnicity group by primary, secondary and third  Years in practice as a midwife  Reason not currently practising  Primary, secondary and third work types  Primary, secondary and third work groups  Primary, secondary and third employer groups  Timelapse of midwives working in an educational institute by primary ethnicity  Summary of DHB area  Primary DHB work area  Hours per week by primary, secondary and third work types combined  Hours per week, all work types combined  First midwifery qualification
Figure 1 Figure 2 Figure 3 Figure 4 Figure 5 Figure 6 Figure 7 Figure 8 Figure 9 Figure 10 Figure 11 Figure 12 Figure 13 Figure 14	Timelapse of midwives with practising certificates  Age of practising midwives  Ethnicity over time  Ethnicity group by primary, secondary and third  Years in practice as a midwife  Reason not currently practising  Primary, secondary and third work types  Primary, secondary and third work groups  Primary, secondary and third employer groups  Timelapse of midwives working in an educational institute by primary ethnicity  Summary of DHB area  Primary DHB work area  Hours per week by primary, secondary and third work types combined  Hours per week, all work types combined

## **Key facts from the 2022 midwifery workforce survey**

This year additional analysis has been undertaken and associated narrative provided in relation to significant areas facing midwifery. These include the workforce shortage, reasons for not practising, and diversity within midwifery. Subsequent reports will be able to build on this analysis.

#### **Midwifery Workforce Changes**

- 3085 midwives held a practising certificate at the time of the survey (12 May 2022). This is 198 less than at the same time last year. The total number of midwives with practising certificates had been steadily increasing, however has now returned to almost 2016 numbers.
- Parental leave was the most common reason for midwives returning to practice and for those currently not practising while still holding a current practising certificate.
- 159 midwives completed the survey relating to why they were not renewing their practising certificate this year. The vaccination mandate was the most common reason, followed by family commitments and work environment. Most of these respondents (66%) had last practised in 2021.
- There is a gradual decrease in the reported hours worked per week with 40.7% of midwives (1256) working 32 hours or less in total per week this year compared to 44.2% in 2021 and 46.4 in 2020.
- 40% of midwives (1197) reported case loading as their main work situation and 48% of midwives (1418) reported core midwifery practice as their main work situation. This is similar to 2021 figures. For the purpose of this survey case loading refers to midwives both employed and LMC midwives who provide care to a "case load" of women and birthing people.
- The most common qualification for entry to the Register, for midwives currently practising, is a degree in Midwifery from an accredited New Zealand education institute (61%). In 2017 the degree in Midwifery qualification was completed by 50% of midwives with practising certificates.
- There has been a gradual downwards trend in midwives undertaking postgraduate study in recent years.

#### **Diversity in the Midwifery Workforce**

- Gender diversity was added as an option from 2021, with four people selecting this option in the current survey. The number of men remains low at eight.
- The workforce is predominantly midwives who selected European as their first ethnicity, making up 82.27%. The percentage of midwives who give New Zealand Māori as their first ethnicity is 7.71% (238). The percentage of midwives who give New Zealand Māori as their first, second, or third ethnicity is 12.16% (375), this number has increased steadily from 2016 when there were 285 midwives.
- 3.66% of midwives (113) reported that they had completed a formal qualification in the last year. Although the distribution is representative across ethnicities, of the 21 Doctorates completed since 2017, none were by Māori or Pasifika midwives.

#### **Proposed changes for future Workforce Surveys**

- Currently, Midwifery Leadership is not visible in the data collection. Specific categories will be added for future surveys.
- There have been changes to the Territorial Local Authorities within each region which have been updated for ongoing data collection.
- Te Tatau o te Whare Kahu | Midwifery Council will undertake additional analysis of key areas as they arise.

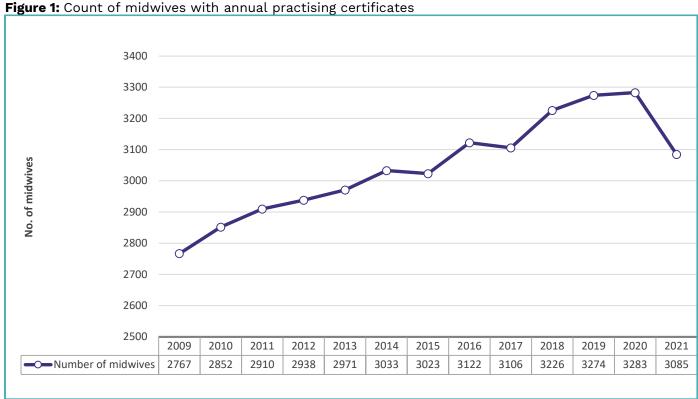
## **Background to data collection and presentation**

- A total of 3085 midwives applied for a practising certificate, as at 12 May 2022. There has been some variation in time of year when the workforce survey has been completed in the past, which may have slightly impacted the comparison of total numbers.
- 1.3% of midwives (41) were applying for their first practising certificate, at the time of the survey therefore no workforce data was collected. This is because these midwives are yet to start in the midwifery workforce. The 41 midwives do not reflect all those who graduated in the previous year, only those who were yet to commence practice.
- 2.5% of midwives (78) reported that they were not practising at the time of renewing their practising certificate.
- 0.3% of midwives (10) were missing workforce survey data due to technical issues. Basic demographic information i.e. data (gender, age, ethnicity) was imported; however, workforce data for this group is not present and marked as Not Stated
- There have been changes in the way data is collected over time. Therefore, in most cases data beyond 2016 or 2017 has not been included as it would not be comparable.

## **Demographics**

#### Total number of midwives renewing practising certificates

There has been a slow increase in the number of midwives applying for a practising certificate each year, however with the significant decrease this year the numbers are now closer to the 2016 total. It is important to note that the workforce survey cut off has been set at different times of the year which may have impacted slightly on the numbers. This cut off however is generally in May of each year.



#### Gender

The option to select Gender Diverse was added in 2021, when one person identified as gender diverse. The number of men remains low.

Table 1: Gender

Gender	Count	%
Female	3073	99.6%
Gender Diverse	4	0.1%
Male	8	0.3%
Grand Total	3085	100.0%

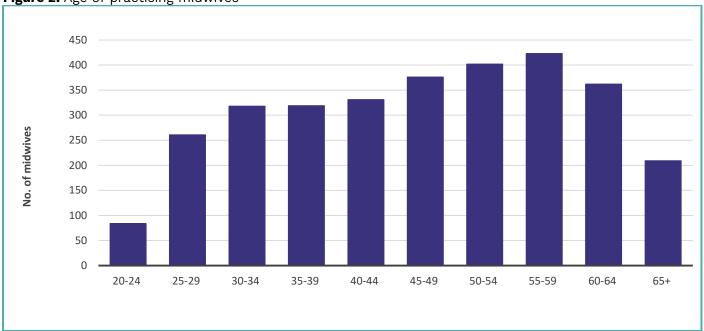
## Age

The average age of practising midwives is 47 years, the same as in 2021, and slightly higher (46.7 years) than 2020 and 2019 (46.5 years). However, over a quarter of midwives are between 50 and 59 years. A significant number of midwives are continuing to work beyond 65 years.

Table 2: Age of practising midwives

Age group	Count	%
20-24	84	2.7%
25-29	261	8.5%
30-34	318	10.3%
35-39	319	10.3%
40-44	331	10.7%
45-49	376	12.2%
50-54	402	13.0%
55-59	423	13.7%
60-64	362	11.7%
65+	209	6.8%
Grand Total	3085	100.0%





#### **Ethnicity**

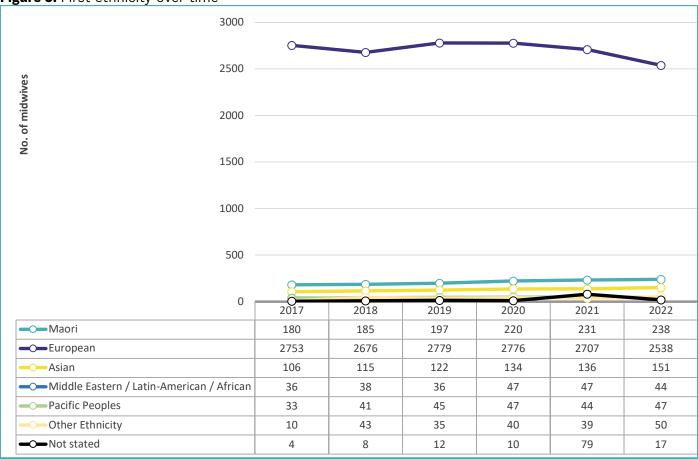
Midwives can provide more than one ethnicity. Since 2016 there has been a steady increase in midwives who identify in 1<sup>st</sup>, 2<sup>nd</sup> or 3<sup>rd</sup> ethnicity as Māori or Pasifika. In 2016 there were 285 midwives identifying as Māori for either 1<sup>st</sup>, 2<sup>nd</sup> or 3rd ethnicity compared to 375 in 2022. Between 2016 and 2022 there was an increase from 65 to 90 Pasifika midwives.

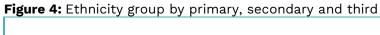
Note: Ethnicity fields have been adjusted and are in line with the tables set up by Statistics NZ. The percentages for 2<sup>nd</sup> and 3<sup>rd</sup> ethnicities are based on the number of midwives who reported a 2<sup>nd</sup> or 3<sup>rd</sup> ethnicity respectively.

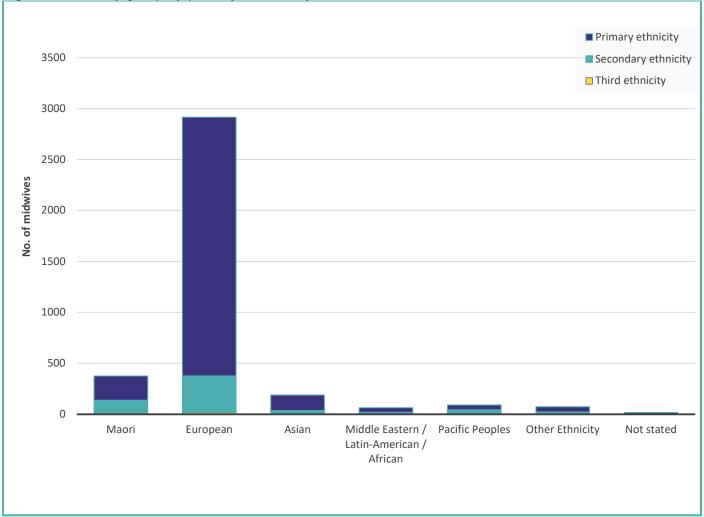
Table 3: Ethnic group

	Primary ethnicity	%	Secondary ethnicity	% 2nd	% of All	Third ethnicity	% 3rd	% of All N=3085	1st, 2nd & 3rd ethnicities	%
Māori	238	7.7%	132	21.8%	4.3%	5	15.6%	0.2%	375	12.2%
European	2538	82.3%	361	59.7%	11.7%	16	50.0%	0.5%	2915	94.5%
Asian	151	4.9%	34	5.6%	1.1%	3	9.4%	0.1%	188	6.1%
Middle Eastern / Latin-American / African	44	1.4%	19	3.1%	0.6%	1	3.1%	0.0%	64	2.1%
Pacific Peoples	47	1.5%	39	6.4%	1.3%	4	12.5%	0.1%	90	2.9%
Other Ethnicity	50	1.6%	20	3.3%	0.6%	3	9.4%	0.1%	73	2.4%
Not stated	17	0.6%							17	0.6%
Grand Total	3085	100.0%								

Figure 3: First ethnicity over time







#### **All Ethnicities**

#### Table 4: All Ethnicities

	Count of 1 <sup>st</sup> Ethnicity
Māori	238
Māori	238
European	2538
American	5
Australian	64
British / Irish	420
Canadian	5
Croatian	1
Czech	1
Dutch	18
English	9
European	11
French	1
German Greek	25 4
Irish	6
Italian	5
New Zealand European	78
New Zeatana European	10
NZ European/Pakeha	1781
Other European	85
Scottish	7
South African European	6
Spanish .	2
Swiss	1
Welsh	3
Asian	151
Afghani	1
Asian	2
Cambodian	1
Chinese	95
Fijian Indian	6
Filipino	3
Hong Kong Chinese	1
Indian	20
Japanese Korean	3 6
Malaysian Chinese	1
Mataysian Chinese	'
Other Southeast Asian	2
Singaporean Chinese	1
South African Indian	4
Southeast Asian	2
Sri Lankan	1
Taiwanese	1
Thai	1
Middle Eastern / Latin-	
American / African	44
African	20
Brazilian	2
Chilean	1
Latin American	5
Middle Eastern	15
Other Zimbabwean	1
Not Stated	17
Not Stated	17
Other Ethnicity New Zealander	<b>50</b> 24
Other	26
Pacific Peoples	47
Cook Island Māori	13
Fijian	6
Niuean	1
Other Pacific Nation	3
Pacific Peoples	1
Samoan	14
	9
Tongan	

	Count of 2 <sup>nd</sup>
	Ethnicity
Māori	132
Māori	132
European	361
American	3
Australian	11
British / Irish	40
Canadian	1
Cornish	1
Croatian	1
Czech	1
Danish	1
Dutch	26
English	6
European	11
French	1
German	3
Greek	3
Irish	5
Italian	4
New Zealand European	22
NZ European/Pakeha	183
Other European	27
Polish	2
Portuguese	1
Scottish	6
South Slav	1
Welsh	1
Asian	34
Chinese	6
Filipino	1
Indian	10
Japanese	5
Korean	1
Lao	1
Other Asian	7
Other Southeast Asian	2
Vietnamese	1
Middle Eastern / Latin-	'
American / African	19
African African	8
Iranian/Persian	1
Israeli/Jewish	1
Latin American	
	5
Lebanese	1
Middle Eastern	3
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Other Ethnicity	20
New Zealander	7
Other	13
Pacific Peoples	39
Cook Island Māori	10
Fijian	5
Niuean	2
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Other Pacific Nation	
Samoan	16
	16 4

	Count of 3 <sup>rd</sup>
	Ethnicity
Asian	3
Indian	1
Chinese	1
Fijian Indian	1
Māori	5
Māori	5
European	16
Croatian	1
Dutch	2
Irish	2
New Zealand European	1
Polish	1
European	3
English	2
Italian	1
British / Irish	1
American	1
Welsh	1
Middle Eastern / Latin-	
American / African	1
Israeli/Jewish	1
Other Ethnicity	3
New Zealander	1
Indigenous American	1
Other	1
Pacific Peoples	4
Cook Island Māori	1
Fijian	2
Other Pacific Peoples	1
Grand Total	32

#### Time in workforce

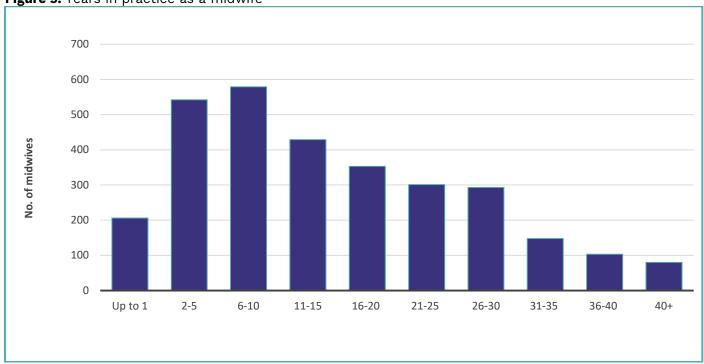
Midwives were asked how many years in total they have been part of the midwifery workforce. This includes time spent working as midwives overseas.

The average time in the midwifery workforce is 15.1 years, similar to 14.9 years in 2021, 15 years in 2020 and 15.5 years in 2019. Over a third (37%) of midwives have only been practising between 2 and 10 years. This table does not include the midwives applying for their first practising certificate or not stated.

Table 5: Years in practice as a midwife

Years in Workforce	Count	%	Cumulative Ascending	Cumulative Descending
Up to 1	206	6.7%	6.7%	98.3%
2-5	542	17.6%	24.2%	91.7%
6-10	579	18.8%	43.0%	74.1%
11-15	429	13.9%	56.9%	55.3%
16-20	353	11.4%	68.4%	41.4%
21-25	301	9.8%	78.1%	30.0%
26-30	293	9.5%	87.6%	20.2%
31-35	148	4.8%	92.4%	10.7%
36-40	103	3.3%	95.8%	5.9%
40+	80	2.6%	98.3%	2.6%
Not stated	51	1.7%	100.0%	0.0%
Grand Total	3085	100.0%		





#### Returned to practise

Midwives were asked whether they had returned to the New Zealand midwifery workforce in the last year.

Of the 3085 midwives, 65 responded that they had returned to practice in the last year. The reasons are outlined below.

Table 6: Reason for return to practice

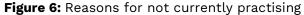
Row Labels	Count of RTP Reason	% of RTP Reason
Parental Leave	26	40.0%
Desire to return to Midwifery	7	10.8%
Employment Opportunity	6	9.2%
Living overseas (Practising)	6	9.2%
Personal Reasons	6	9.2%
Returning to New Zealand	5	7.7%
Moved to New Zealand	3	4.6%
Return to health	2	3.1%
Awareness of labour shortage	1	1.5%
Covid affected practise	1	1.5%
Returned during Covid	1	1.5%
Financial Reasons	1	1.5%
Grand Total	65	100.0%

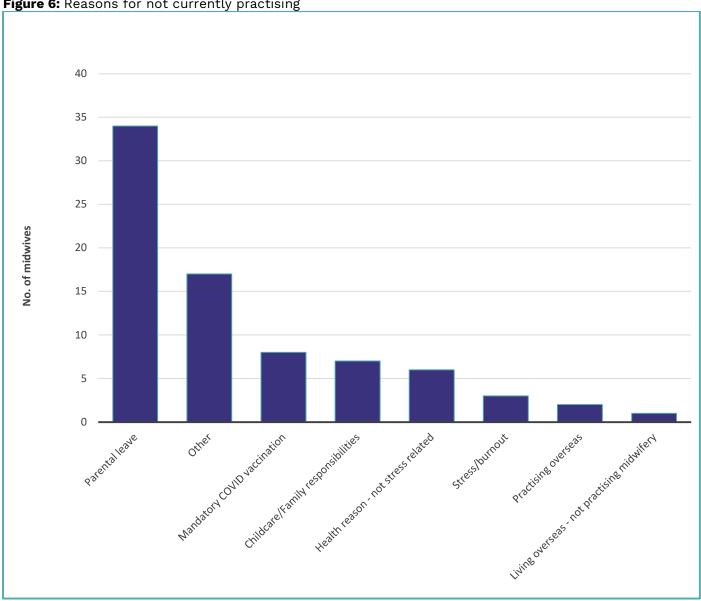
### Not currently practising

Midwives who renewed their practising certificate but were not currently practising gave reasons for not practising which are presented in the following table. This question refers to the status at the time of applying for a practising certificate - some may have not been working in the year(s) preceding and have now decided to return to practise. The table does not include midwives who completed the nonpractising survey.

Table 7: Reasons for not currently practising

	Count of Not Practising		% of All
Row Labels	Reason	%	N=3085
Parental leave	34	43.6%	1.1%
Other	17	21.8%	0.6%
Mandatory COVID vaccination	8	10.3%	0.3%
Childcare/Family responsibilities	7	9.0%	0.2%
Health reason - not stress related	6	7.7%	0.2%
Stress/burnout	3	3.8%	0.1%
Practising overseas	2	2.6%	0.1%
Living overseas - not practising midwifery	1	1.3%	0.0%
Grand Total	78	100.0%	2.5%





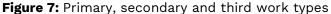
## **Working arrangements**

#### **Work situation**

Midwives selected the option that best described their work situation from a drop-down menu. It has been noted that there is no category that captures midwifery leadership roles in any aspects of midwifery practice. It is also possible that self-employed LMC midwives may have selected the 'Case load - other' option.

Table 8: Primary, secondary and third work types

	Primary	% 1st	Secondary	% 2nd	% of All	Third	% 3rd	% of All
	Туре		Туре			Туре		N=3085
Administration - DHB	84	2.7%	7	1.2%	0.2%	1	1.8%	0.0%
Administration - Other	14	0.5%	7	1.2%	0.2%	0	0.0%	0.0%
Case Load – employed DHB	91	2.9%	37	6.6%	1.2%	3	5.4%	0.1%
Case Load – employed other	117	3.8%	13	2.3%	0.4%	4	7.1%	0.1%
Case load - Self employed LMC	989	32.1%	134	23.8%	4.3%	7	12.5%	0.2%
Core - Primary	277	9.0%	59	10.5%	1.9%	4	7.1%	0.1%
Core - Secondary	542	17.6%	70	12.5%	2.3%	6	10.7%	0.2%
Core - Secondary/Tertiary	599	19.4%	47	8.4%	1.5%	2	3.6%	0.1%
Education - DHB	30	1.0%	6	1.1%	0.2%	1	1.8%	0.0%
Education - Tertiary	72	2.3%	25	4.4%	0.8%	2	3.6%	0.1%
Maternity leave, returning	17	0.6%	4	0.7%	0.1%	0	0.0%	0.0%
Nursing	2	0.1%	29	5.2%	0.9%	3	5.4%	0.1%
Other Midwifery	64	2.1%	57	10.1%	1.8%	9	16.1%	0.3%
Other not in employment	4	0.1%	3	0.5%	0.1%	1	1.8%	0.0%
Other paid employment	9	0.3%	42	7.5%	1.4%	10	17.9%	0.3%
Professional advice, policy	25	0.8%	8	1.4%	0.3%	1	1.8%	0.0%
Study leave, returning	0	0.0%	2	0.4%	0.1%	0	0.0%	0.0%
Undertaking research	9	0.3%	11	2.0%	0.4%	2	3.6%	0.1%
Working overseas	11	0.4%	1	0.2%	0.0%	0	0.0%	0.0%
Not stated	129	4.2%	0	0.0%	0.0%	0	0.0%	0.0%
Grand Total	3085	100.0%	562			56		



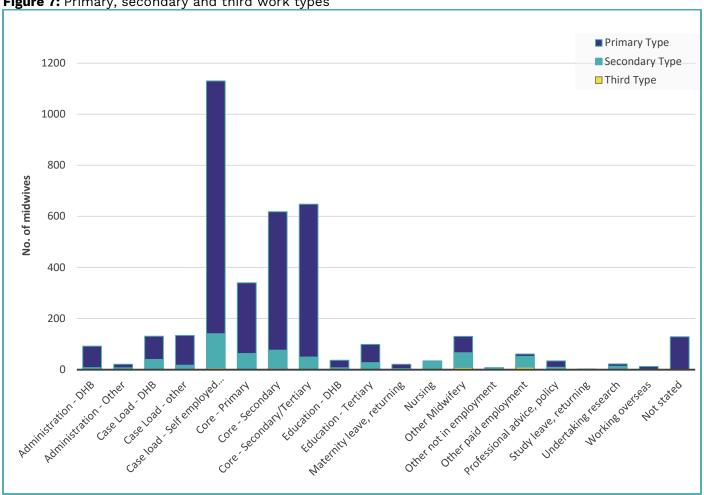
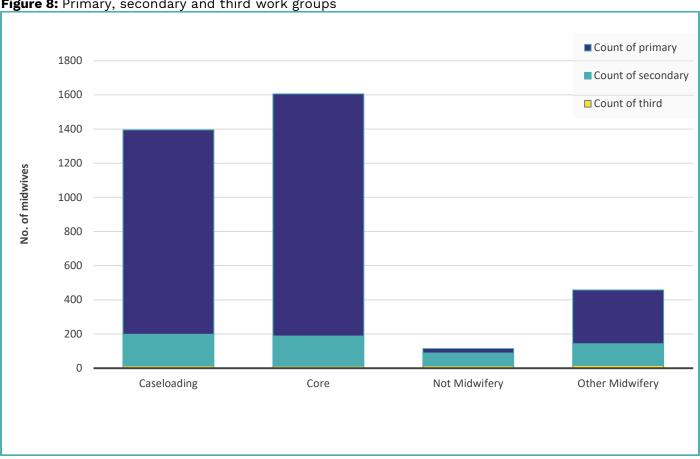


Table 9: Primary, secondary and third work groups

Work group	Count of primary	% 1st	Count of secondary	% 2nd	% of All	Count of third	% 3rd	% of All
Caseloading	1197	38.8%	184	32.7%	6.0%	14	25.0%	0.5%
Core	1418	46.0%	176	31.3%	5.7%	12	21.4%	0.4%
Not Midwifery	26	0.8%	75	13.3%	2.4%	14	25.0%	0.5%
Other Midwifery	315	10.2%	127	22.6%	4.1%	16	28.6%	0.5%
Not stated	129	4.2%	0	0.0%	0.0%	0	0.0%	0.0%
Grand Total	3085	100.0%	562	100.0%	18.2%	56	100.0%	1.8%





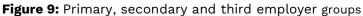
#### **Employer type**

Midwives selected the employer type that best specified their work situation from a drop-down menu. At the time of the survey over half (53%) were employed by District Health Boards. (NB the survey closed before the health reforms).

Further analysis has been undertaken on the ethnicity of educators working in the tertiary setting. First ethnicity has been used in this initial analysis and a different picture may be shown if 1st, 2nd and 3rd ethnicity are used. However, currently there appears to be little shift in ethnic diversity since 2016.

Table 10: Primary, secondary and third employer type

	Primary employer	% 1st	Secondary employer	% 2nd	% of All	Third employer	% 3rd	% of All
District Health Board	1646	53.4%	239	42.5%	7.7%	16	28.6%	0.5%
Private maternity/trust	117	3.8%	28	5.0%	0.9%	4	7.1%	0.1%
Midwifery Agency	9	0.3%	9	1.6%	0.3%	3	5.4%	0.1%
Self-employed - LMC	1005	32.6%	168	29.9%	5.4%	11	19.6%	0.4%
Māori service provider	10	0.3%	5	0.9%	0.2%	0	0.0%	0.0%
Pacific service provider	1	0.0%	0	0.0%	0.0%	0	0.0%	0.0%
Subcontracted to LMC	28	0.9%	13	2.3%	0.4%	1	1.8%	0.0%
Educational institution	78	2.5%	37	6.6%	1.2%	4	7.1%	0.1%
Government agency	16	0.5%	14	2.5%	0.5%	1	1.8%	0.0%
Other	46	1.5%	49	8.7%	1.6%	16	28.6%	0.5%
Not stated	129	4.2%	0	0.0%	0.0%	0	0.0%	0.0%
Grand Total	3085	100.0%	562	100.0%	18.2%	56	100.0%	1.8%



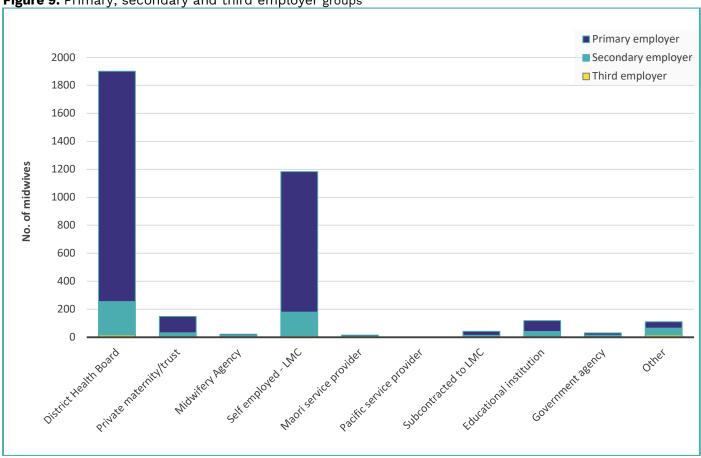
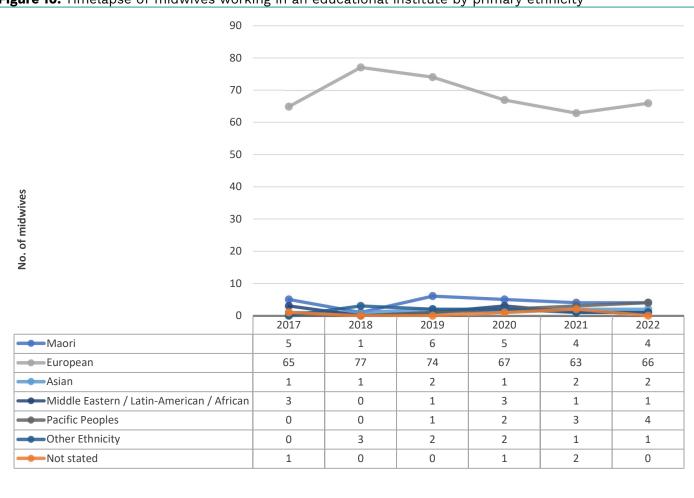


Figure 10: Timelapse of midwives working in an educational institute by primary ethnicity



## Work geographical location

The following table shows the number of midwives per 1000 head of population within each region. The population data has been taken from the 2018 Census data. Tasman and Nelson have very different rates to the rest of the regions, however if these regions are combined the rate becomes similar. Each region is geographically different with varying population needs; therefore, the same rate may not be appropriate across all areas. As some of the Territorial Local Authorities (TLA) have changed they have been included in the region where the largest centre is situated. These will be updated to align with the current TLA for future surveys.

Table 11: Primary work area region - number of midwives

Region	Count in Region	umber of midwives  Territorial Local Authority	Count in Territorial Local Authority	<b>% of TLA</b> N=3085	Midwives per region per1000 population
Northland	116	Far North	38	1.2%	(at Census 2018) 0.62
Northland	110	Kaipara	5	0.2%	0.62
		Whangārei	73	2.4%	
Auckland	969	Auckland City	453	14.7%	0.59
Adektand	363	Franklin	28	0.9%	0.55
		Manukau	197	6.4%	
		North Shore	111	3.6%	
		Papakura	22	0.7%	
		Rodney	29	0.9%	
		Waitākere	129	4.2%	
Waikato	286	Hamilton	105	3.4%	0.60
· · · · · · · · · · · · · · · · · · ·	200	Hauraki	0	0.0%	0.00
		Matamata-Piako	4	0.1%	
		Ōtorohanga	0	0.0%	
		South Waikato	8	0.3%	
		Taupō	14	0.5%	
		Thames-Coromandel	8	0.3%	
		Waikato	133	4.3%	
		Waipā	12	0.4%	
		Waitomo	2	0.1%	
Bay of Plenty	194	Kawerau	0	0.0%	0.60
= =, 0	.51	Ōpōtiki	4	0.1%	3.00
		Rotorua	48	1.6%	
		Tauranga	108	3.5%	
		Western Bay of Plenty	4	0.1%	
		Whakatāne	30	1.0%	
Gisborne	34	Gisborne	34	1.1%	0.69
Hawke's Bay	95	Central Hawkes Bay	5	0.2%	0.55
		Hastings	66	2.1%	
		Napier	18	0.6%	
		Wairoa	6	0.2%	
Taranaki	62	New Plymouth	53	1.7%	0.51
		South Taranaki	8	0.3%	
		Stratford	1	0.0%	
Manawatū-Whanganui	158	Horowhenua	13	0.4%	0.64
		Manawatū	55	1.8%	
		Palmerston North	37	1.2%	
		Rangitīkei	3	0.1%	
		Ruapehu	3	0.1%	
		Tararua	8	0.3%	
		Whanganui	39	1.3%	
Wellington	319	Carterton	0	0.0%	0.61
<u> </u>		Kāpiti Coast	19	0.6%	
		Lower Hutt	73	2.4%	
		Masterton	26	0.8%	
		Porirua	28	0.9%	
		South Wairarapa	3	0.1%	
		Upper Hutt	7	0.2%	
		Wellington	163	5.3%	
Tasman	10	Tasman	10	0.3%	0.19
Nelson	55	Nelson	55	1.8%	1.04
Marlborough	35	Marlborough	35	1.1%	0.72
West Coast	27	Buller	1	0.0%	0.83
		Grey	19	0.6%	
		Westland	7	0.2%	
Canterbury	394	Ashburton	18	0.6%	0.63
-		Banks Peninsula	1	0.0%	
		Christchurch	310	10.0%	
		Hurunui	1	0.0%	
		Kaikōura	0	0.0%	
		Mackenzie	2	0.1%	
		Selwyn	16	0.5%	
		Timaru	23	0.7%	
		Waimakariri	22	0.7%	
		Waimate	1	0.0%	
Otago	138	Central Otago	17	0.6%	0.59
	.55	Clutha	7	0.2%	3.00
		Dunedin	87	2.8%	+

		Queenstown-Lakes	16	0.5%	
		Waitaki	11	0.4%	
Southland	50	Gore	7	0.2%	0.50
		Invercargill	13	0.4%	
		Southland	30	1.0%	
Chatham Islands	0	Chatham Islands	0	0.0%	
Totals			2942	95.4%	
Overseas		Africa & Middle East	2	0.1%	
		Asia	1	0.0%	
		Australia	7	0.2%	
		Central & South America	0	0.0%	
		Europe (other than UK)	1	0.0%	
		Pacific	0	0.0%	
		United Kingdom	1	0.0%	
		United States of America	0	0.0%	
		Overseas - other areas	2	0.1%	
Totals		Totals	14	0.5%	
Other		Not Stated	129	4.2%	
Totals			129	4.2%	
Grand Total			3085	100.0%	

#### **DHB** area

The number of midwives employed at Auckland DHB is significantly larger than other areas.

Table 12: Primary DHB work area

District Health Board (North Island)	Count of primary	% of primary	Count of secondary	% of secondary	Count of third	% of third
Northland DHB	116	3.9%	29	1.0%	2	0.1%
Waitematā DHB	269	9.0%	48	1.6%	3	0.1%
Auckland DHB	453	15.2%	68	2.3%	8	0.3%
Counties Manukau DHB	247	8.3%	43	1.4%	2	0.1%
Waikato DHB	272	9.1%	43	1.4%	5	0.2%
Lakes DHB	62	2.1%	11	0.4%	0	0.0%
Bay of Plenty DHB	146	4.9%	23	0.8%	2	0.1%
Tairāwhiti DHB	34	1.1%	7	0.2%	1	0.0%
Hawkes Bay DHB	0	0.0%	0	0.0%	0	0.0%
Taranaki DHB	62	2.1%	20	0.7%	3	0.1%
Wanganui DHB	45	1.5%	7	0.2%	1	0.0%
MidCentral DHB	113	3.8%	24	0.8%	2	0.1%
Capital and Coast DHB	210	7.0%	38	1.3%	6	0.2%
Hutt DHB	80	2.7%	17	0.6%	2	0.1%
Wairarapa DHB	29	1.0%	7	0.2%	1	0.0%
Totals	2138	71.5%	385	12.9%	38	1.3%

District Health Board (South Island)	Count of primary	% of primary	Count of secondary	% of secondary	Count of third	% of third
Nelson-Marlborough DHB	100	3.3%	23	0.8%	1	0.0%
Canterbury DHB	368	12.3%	61	2.0%	7	0.2%
West Coast DHB	27	0.9%	7	0.2%	2	0.1%
South Canterbury DHB	26	0.9%	7	0.2%	1	0.0%
Southern DHB	188	6.3%	47	1.6%	5	0.2%
Totals	709	23.7%	145	4.8%	16	0.5%
Overseas	14	0.5%	0	0.0%	0	0.0%
Not Stated	129	4.3%	2523	84.4%	3029	101.3%
Grand Totals	2990	100.0%	530	17.7%	54	1.8%

Figure 11: Summary of DHB area

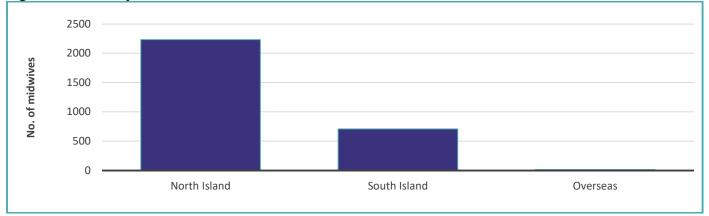
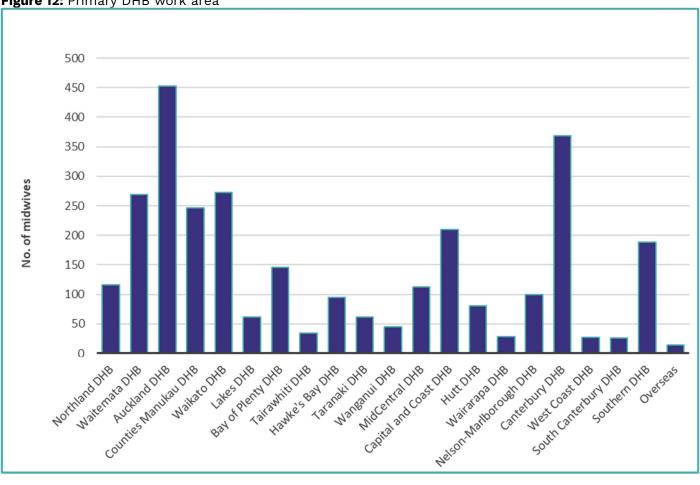


Figure 12: Primary DHB work area



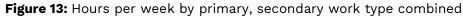
## **Working hours**

Midwives were asked how many hours they work in a typical week. 40.7% of midwives (1256) reported working 32 hours or less in total per week. This percentage has decreased from 44.2% in 2021 and 46.4 in 2020. Of note is that 24% of midwives are working more than 40 hours per week.

There were 807 (26%) midwives working more than 40 hours in total per week in either their one role or combined roles.

 Table 13: Hours per week – primary, secondary and third work type

Table 101 Hours por Wook primary, occordany and time Work type						
Hours worked	Count of primary	% of primary	Count of secondary	% of secondary	Count of third	% of third
1-8	94	3.0%	306	62.8%	31	73.8%
9-16	239	7.7%	112	23.0%	8	19.0%
17-24	461	14.9%	45	9.2%	2	4.8%
25-32	671	21.8%	10	2.1%	0	0.0%
33-40	832	27.0%	8	1.6%	1	2.4%
40+	659	21.4%	6	1.2%	0	0.0%
Not stated	129	4.2%	0	0.0%	0	0.0%
Grand Totals	3085	100.0%	487	100.0%	42	100.0%



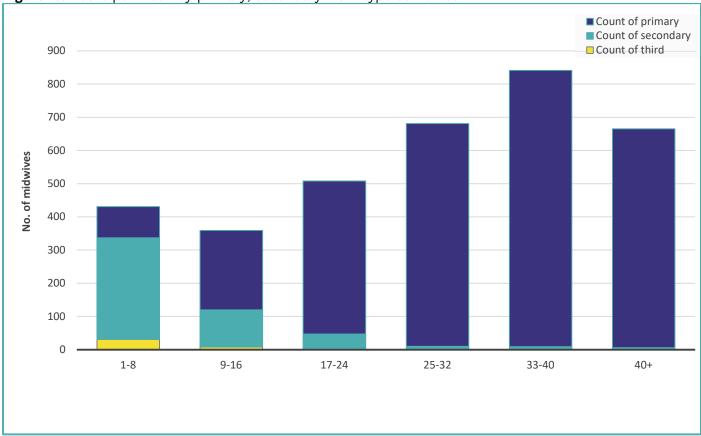
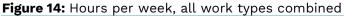
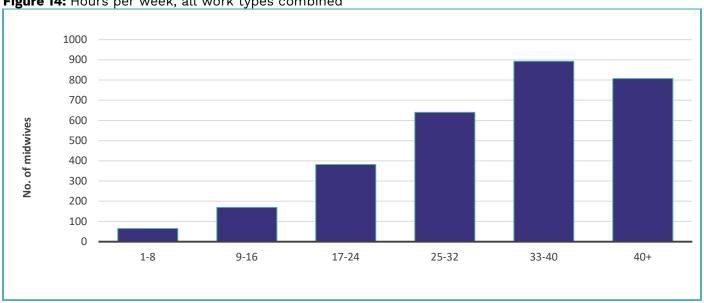


Table 14: Hours per week in all situations combined

Total Hours worked	Count of all	%	Cumulative Ascending	Cumulative Descending
1-8	65	2.1%	2.1%	100.0%
9-16	169	5.5%	7.6%	97.9%
17-24	382	12.4%	20.0%	92.4%
25-32	640	20.7%	40.7%	80.0%
33-40	893	28.9%	69.7%	59.3%
40+	807	26.2%	95.8%	30.3%
Not stated	129	4.2%	100.0%	4.2%
Grand Total	3085	100.0%		





## **Working part time**

Midwives were asked what their main reason was for working part-time in midwifery. 13% (170) of midwives selected "other" as their answer. This could be an area to gather further data in the future to gain a clearer understanding of the reasons.

Table 15: Reason for working part time

Reason for working part time	Count
Prefer working on a part time or casual basis	591
Parental responsibility	266
Have reduced hours due to high workload	175
Building a case load	29
Student	21
No access to flexible working hours	17
No access to childcare	10
Not enough midwifery work available	4
Seeking midwifery work	3
Other	170
Grand Total	1286

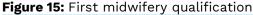
## **Qualifications**

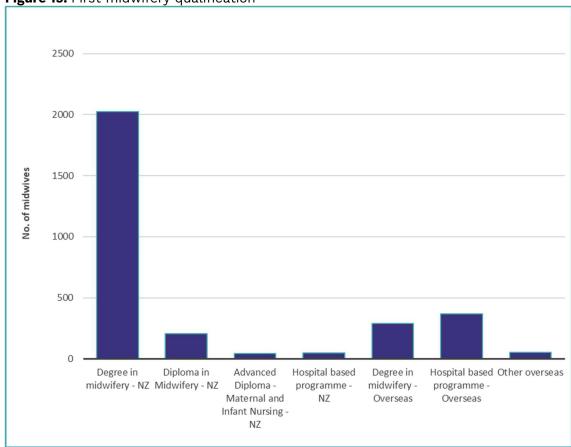
## First midwifery qualification

A New Zealand degree in midwifery is the most common first midwifery qualification. The shift to more than 50% of midwives having this as their first qualification occurred in 2017, rising to 65.6% in 2022.

Table 16: First midwifery qualification

First Qualification	Count	%
Degree in midwifery - NZ	2024	65.6%
Diploma in Midwifery - NZ	204	6.6%
Advanced Diploma - Maternal & Infant Nursing - NZ	43	1.4%
Hospital based programme - NZ	48	1.6%
Degree in midwifery - Overseas	292	9.5%
Hospital based programme - Overseas	370	12.0%
Other overseas	53	1.7%
Not stated	51	1.7%
Grand Total	3085	100.0%





#### **Current study - expected qualification**

There are currently 6% of midwives studying towards a midwifery postgraduate qualification. There has been a gradual downwards trend in midwives undertaking postgraduate study with 8.3% in 2016.

Table 17: Current study - qualification type

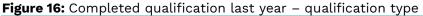
Currently studying	Count	%
Yes	184	6.0%
No	2850	92.4%
Not stated	51	1.7%
Grand Total	3085	100.0%

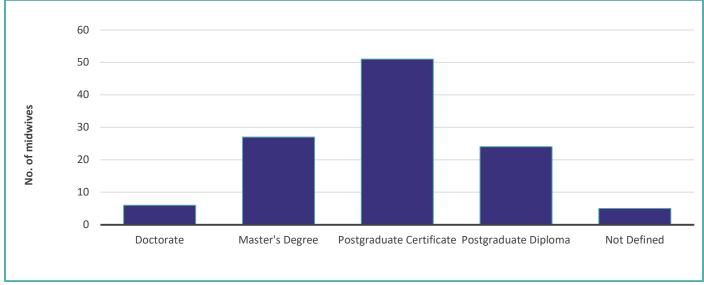
#### Completed study last year - completed qualification

The following qualification were completed in the previous year.

Table 18: Completed qualification last year - qualification type

Count of Qualification							
Qualification type	(analysis)	%	<b>% of all</b> (N=3085)				
Doctorate	6	5.4%	0.2%				
Master's Degree	27	24.1%	0.9%				
Postgraduate Certificate	51	45.5%	1.7%				
Postgraduate Diploma	24	21.4%	0.8%				
Not Defined	4	3.6%	0.1%				
Grand Total	112	100.0%	3.6%				





#### Completed qualification by ethnicity

The ethnicity of those who completed post-graduation qualifications last year matches that of the ethnicity of midwives overall. There is a difference in type of qualification with only midwives identifying as European completing a Doctorate. Since 2017 of the 21 midwives who have completed a Doctorate, none are Māori or Pasifika.

**Table 19**: Completed qualification last year – primary ethnicity

Primary Ethnicity	Qualification	Count of Qualification	%
Māori	Master's Degree	2	1.8%
	Postgraduate Certificate	4	3.6%
	Postgraduate Diploma	2	1.8%
European	Doctorate	5	4.5%
	Master's Degree	24	21.4%
	Not Defined	3	2.7%
	Postgraduate Certificate	42	37.5%
	Postgraduate Diploma	21	18.8%
Pacific Peoples	Postgraduate Certificate	2	1.8%
•	Postgraduate Diploma	1	0.9%
Asian	Not Defined	1	0.9%
	Postgraduate Certificate	3	2.7%
Not Stated	Doctorate	1	0.9%
	Master's Degree	1	0.9%
Grand Total		112	100.0%

#### Major/Specialty

Table 20: Completed qualification last year - Major/Speciality

Qualification – Major	Count of Last Year Major	%	% of all
Complex Care	12	10.7%	0.4%
Global Maternal Health	1	0.9%	0.0%
Health	5	4.5%	0.2%
Health Equity	1	0.9%	0.0%
Health Professional Education	1	0.9%	0.0%
Health Sciences	6	5.4%	0.2%
Healthcare	1	0.9%	0.0%
Healthcare Research	1	0.9%	0.0%
Human Nutrition	1	0.9%	0.0%
Lactation	4	3.6%	0.1%
Leadership and Management	3	2.7%	0.1%
Master of Professional Practice	1	0.9%	0.0%
Midwifery	63	56.3%	2.0%
Nutrition	1	0.9%	0.0%
Obstetrics & Gynaecology	1	0.9%	0.0%
Pacific Health	1	0.9%	0.0%
Primary Health Care	1	0.9%	0.0%
Professional supervision	1	0.9%	0.0%
Public health	2	1.8%	0.1%
Research Specialisation	1	0.9%	0.0%
Māori Health	1	0.9%	0.0%
Not Stated	3	2.7%	0.1%
Grand Total	112	100.0%	3.6%

#### **Qualification provider**

Table 21: Completed qualification last year - qualification provider

Qualification - Provider	Count of Provider (analysis)	%	<b>% of all</b> (N=3085)
Auckland University of Technology	30	26.8%	1.0%
IBCLC	4	3.6%	0.1%
Otago Polytechnic	45	40.2%	1.5%
University of Newcastle	1	0.9%	0.0%
University of Otago	5	4.5%	0.2%
Victoria University of Wellington	23	20.5%	0.7%
Whitireia	2	1.8%	0.1%
WINTEC	2	1.8%	0.1%
Grand Total	112	100.0%	3.6%

## **Nursing registration**

The following table shows the number of midwives who are also on the nursing register, and whether they will be applying to the Nursing Council for nursing practising certificate. Out of the 532 that stated they were on a nursing register, 267 (50%) said they would apply for a nursing practising certificate.

**Table 22:** Midwives on a nursing register and midwives who will apply for a nursing practising certificate this year.

	Will apply for a nursing practising certificate			
On a nursing register or roll	Yes	No	Not Stated	Grand Totals
Yes	267	265		532
No				2502
Not Stated			51	10
Grand Total	267	265	51	3085

## Non practising midwives

Midwives who changed their status online to non-practising were able to complete a survey relating to the reasons they were ceasing practice.

There were 419 midwives who did not renew their practising certificate for 2022-2023. Of this, 159 midwives completed the online process and the survey. The rest are deemed to be not active. Of those midwives that completed the survey 66% had ceased practice in 2021 and 23% in 2022.

There are many reasons for midwives not renewing their practising certificate. The most common explanation in the current survey related to the mandate requirements, working conditions, and family or parenting responsibilities. A small number of midwives indicated they had retired. Working conditions related to renumeration, stress/burnout, too much responsibility and feeling unsupported. Although there were 36 midwives who completed the survey and selected MoH mandates for health professionals as the reason, this accounts for only 8.6% of all midwives who did not renew their practising certificate.

#### **Returning to practise**

Midwives who completed the non-practising survey had the option of stating whether they intended to return to practice in the future.

Reviewing the comments, it appeared that not all those who selected 'no' (35%) in relation to returning to practice were definite about their decision. There appeared to still be a possibility that they may return in different circumstances. The free text comments were therefore analysed together (both 'yes' and 'no' answers to return). The multiple influences on returning were categorised, noting that some people raised several areas. There were comments outlining what would influence their decision to return to practice from 96 of the 159 midwives.

The removal of the vaccine mandate was the most common single reason that would influence the return to practice. There were some comments discussing the role of midwives as upholding body autonomy and informed consent. Two people indicated that it was the lack of the Novavax that contributed.

There were also many comments that could be broadly categorised as sustainability of the profession. These related to remuneration and the current working environment. Some specifically raised sustainability of the profession as a concern mentioning burnout, frustration, and depression. Clearly linked to sustainability is a sense of needing to be valued and respected as a profession by the public and other health professions.

Table 23: Main influencing factors for Returning to Practise

Influencing Factors		Count
Mandate removal		43
Improved sustainability of profession		
	Renumeration	31
	Working environment	33
	Sustainability	5
Improved value / respect for midwives		13
Support from Midwifery Council		13
Total		

## Age groups

The following chart compares the percentage per age groups of midwives who selected non-practising to the age groups of those remaining in practice. If the 65+ age group is removed, between 1% and 6% of each age group have not renewed.



