

National Health Service maternity workers: Underpaid, under-resourced and understandably angry

Sascha Woods
7 November 2021

Dr Edward Morris, the UK's most senior gynaecologist, has warned of the "immense pressures facing our maternity staff this winter if the situation continues as it is", as the COVID-19 pandemic continues unchallenged by the UK government.

Speaking to the *Guardian*, Dr Morris said, "With the number of Covid-19 cases rising once more, the NHS [National Health Service] could soon be in a situation where it is unable to deliver the care it needs to or deal with the huge backlog that has already built up."

"Many women and girls who are suffering with gynaecological conditions that are currently on extensive waiting lists with no end in sight," Dr Morris said.

Under conditions of rising Covid-19 cases, this dire situation could be worsened if the NHS followed the same procedure of redeploying maternity staff to other duties as it did in the first wave of the pandemic—something Dr Morris urged NHS trusts and boards "avoid at all costs."

Maternity units were already reaching crisis levels before the Covid-19 pandemic hit. Much like the rest of the NHS, maternity units and services have been cut to the bone to make savings. Staff are being put under pressure to deliver care appointments and meet unachievable targets.

A petition started by midwife Cheryl Samuels calling for urgent government investment in maternity services to solve the staffing crisis has collected around 70,000 signatures.

The petition on change.org highlights the shortage of 2,000 full-time midwives estimated by the Royal College of Midwives, as a result of which maternity staff face unprecedented pressures due to the increased

workloads.

"These are not new findings," the petition continues. The UK Whelm Study conducted by Cardiff University in 2018 had already exposed high levels of burnout and mental health illnesses suffered by midwives. This found that 67 percent of participants were experiencing work-related burnout, and more than one-third recorded scores indicating moderate to severe stress (36 percent), anxiety (38 percent) and depression (33 percent).

This is a message being repeated by maternity staff. One midwife speaking anonymously to the WSWS said:

"Our sector has experienced under funding for years. Recently, an initiative called 'Continuity of carer' was forced onto our understaffed unit. With unworkable hours, and no thought to staff's own lives. There has been no flexibility for childcare or for the care of elderly parents. Shift patterns leave no room or energy for a life. Community staff are working all day and are then being brought in at night with no choice to cover, not just home births, but badly staffed delivery units or birth centres with no consideration to the number of hours worked in a day.

"Added to that staff are undervalued by management. There has been no attempt to retain experienced staff, who leave due to unworkable continuity of carer contracts or the toxic conditions we work in. Government-led initiatives such as continuity of carer, can leave the maternity unit dangerously low on staff and impacts on every area.

"Community staff are treated like a sticking plaster to cover all the problems of the unit even though they are on half the level of safe staffing already.

"That's the tip of the iceberg. Staff morale is terrible.

Fabulous, skilled, core teams are pulled apart to spread each midwife across all areas of the service and during the initial pandemic, outside of our unit. Camaraderie and good will is the only thing left and it's fading fast."

In early October, the Royal College of Midwives published an opinion piece on its website titled, "How do we keep giving when there's nothing more to give?"

"Staffing is in a tragic state. Begging, borrowing and pleading for more staff, more help, more for tonight's shift, cover for the weekend where we're four short, where two just called in sick and only the newly qualified is rostered to cover the antenatal ward. Simply hiring more isn't possible. There just is not more of us. We're reducing the time we give to women, having to close facilities, reduce antenatal education, postnatal visits cut to a minimum and we're having to send families on their way ASAP."

Its concluding paragraph is damning: "Protecting and providing for maternity services in the NHS protects the whole country's future. ... Healthy, happy and supported mothers, babies and families is the ultimate goal for midwives and right now it's not happening. The government is failing all of us."

Pressure group March with Midwives has called for protest vigils on November 21. Its manifesto states, "2021 has seen maternity services become critically unsafe for staff and users."

"The maternity system is not just under pressure or even on its knees. It is utterly broken and not fit for purpose."

In a survey of its members, the Royal College of Midwives found that more than half (57 percent) said they were considering leaving in the next year. The most cited reasons given were concerns with staffing levels (80 percent) and dissatisfaction with the quality of care that could be provided (66 percent).

Statistics for July (the most recent available) show that 300 midwives had left the service since May, the fastest fall for these two months in any year recorded by the NHS over the last 20 years.

Nearly all (92 percent) of the midwives and maternity support workers responding said they did not feel their work was valued by the current government.

This is nothing new. A pledge made by David Cameron's Conservative/Liberal Democrat government in 2010 to boost midwife numbers by

3,000 was quietly dropped the following year, and remains unfulfilled a decade later.

Since the financial crash of 2008 and the following decade of austerity under Labour and then Tory governments, the health unions have suppressed one struggle after another by health workers. Where they were unable to prevent strikes breaking out, such as by junior doctors in 2016, these were left isolated and eventually sold out.

NHS FightBack encourages midwives to join with other NHS workers in a united struggle against the privatisation of the NHS, for better staffing, pay and conditions through establishing independent rank-and-file committees to organise and lead the fight.

Contact NHS FightBack and link up with our Facebook page.



To contact the WSWS and the Socialist Equality Party visit:

wsws.org/contact