

A meaningful work in a strained context - exploring midwives' work situation and professional role

Akademisk avhandling

Som för avläggande av filosofie doktorsexamen vid Sahlgrenska akademien, Göteborgs universitet kommer att offentlig försvaras i hörsal Arvid Carlsson, Academicum, Medicinargatan 3, Göteborg, den 3 december, klockan 13.00.

Av **Malin Hansson**

Fakultetsopponent: Docent Margareta Larsson, Uppsala Universitet, Sverige.

Avhandlingen baseras på följande delarbeten

- I. Hansson, M., Lundgren, I., Hensing, G., & Carlsson, I-M. (2019). Veiled midwifery in the baby factory - A grounded theory study. *Women and Birth*, 32(1), 80-86.
doi: 10.1016/j.wombi.2018.04.012
- II. Hansson, M., Lundgren, I., Dencker, A., Taft, C., & Hensing, G. (2020). Work situation and professional role for midwives' at a labour ward pre and post implementation of a midwifery model of care – A mixed method study. *International Journal of Qualitative Studies on Health and Well-being*, 15(1), 1848025.
doi: 10.1080/17482631.2020.1848025
- III. Hansson, M., Lundgren, I., Hensing, G., Dencker, A., Eriksson, M., Carlsson I-M. (2021). Professional courage to create a pathway within midwives' fields of work: a grounded theory study. *BMC Health Services Research*, 21(1), 312.
doi: 10.1186/s12913-021-06311-9
- IV. Hansson, M., Dencker, A., Lundgren, I., Carlsson, I-M., Eriksson, M., Hensing, G. (2021). Job satisfaction in midwives and its association with organisational and psychosocial factors at work: A nation-wide, cross-sectional study.
Under review.

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Abstract

Midwives report a challenging work situation globally with a work force shortage, which is a large challenge for health-care organisations and can influence midwives' professional role. The **overall aim** of this thesis was to explore midwives' work situation and professional role in relation to models of care, salutogenic factors and job satisfaction and demands. The **methods** used in studies I-IV and the synthesis were classical grounded theory (I: n=27, III: n=12, synthesis) simultaneous mixed method (II: n=16/58) and statistical analyses of survey measurements (IV: n=1747). Data were collected by conducting focus group and face-to-face interviews and surveys, one of which was nation-wide. **Results:** In study I, other professions' main concern were midwives marching to own drum and safeguarding midwifery and that the midwifery profession was veiled. The other professionals thus used unveiling strategies scrutinising, streamlining and collaborating admittance. All professionals co-existed in a strained baby factory context. In study II, a theoretical midwifery model of woman-centred care had the potential to strengthen midwives' professional role and practice but not the strained work situation. In study III, the substantive theory of professional courage to create a pathway within midwives' fields of work provided an explanation of health-promoting facilitative conditions in midwives' work. However, there were vital organisational prerequisites that needed to be fulfilled, organisational resources, visualising midwifery and a reflective environment. In study IV possibilities for development, quality of work, role conflict, burnout and recognition, explained most of the variance in midwives' job satisfaction ($R^2 = .626$). Midwives demonstrated the largest mean difference from the reference population in terms of higher emotional demands, lower influence at work and a greater meaning in their work. The theoretical synthesis of the results of studies I-IV emerged as a '*professional courage to maintain a meaningful work in a strained context*'. The **overall conclusion** was that midwives report great meaningfulness in their work related to having a possibility to work based on the midwifery profession and having organisational prerequisites. Having a distinct professional role was facilitated by professional courage and by safeguarding a high-quality evidence-based midwifery care. These resources enhanced the motivational processes and job satisfaction. However, the midwives were found to work in a highly strained, factory-like, over-medicalised context with high demands and lack of organisational resources and support systems. Which in turn streamlined midwifery work, induced the impairment processes and adversely affected job satisfaction and occupational health.

Keywords: Work situation, Work environment, Midwifery, Professional role, Salutogenesis, JD-R

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