Introduction:

Contemporary midwifery involves providing maternity care to a wide and diverse range of women, their babies, partners and families. The women with whom midwives come into daily contact will be of different ages, cultural backgrounds, socio-economic circumstances, and will have varying care needs and expectations. With advances in scientific medicine and technology, the profile of women accessing UK maternity services is also changing. Increasingly, women with complex social issues (e.g., asylum seekers/refugees, pregnant adolescents and those with substance misuse problems) are requiring both midwifery and specialist care and support. Similarly, women with underlying medical conditions are entering into pregnancy, where in past years this would have not been an option for them. Midwives are therefore required to act as skilled, independent practitioners, but equally, need to be able to work alongside a wide range of multi-professional health care practitioners. Midwives are also integral to ensuring that women receive the information and support they need to make the right choices for them and their baby, although at times, these choices may be significantly limited by the woman’s individual circumstances.

If these challenges and the potential rewards of being a midwife appeal to you and you are considering a career in midwifery the following information should be helpful to you. This material applies to individuals who are interested in undertaking midwifery education programmes in England, Scotland, Wales and Northern Ireland.

About this resource

This resource provides information on the following:

- The role of the midwife
- Who can be a midwife?
- What are the qualities needed to become a midwife?
- Entry requirements to midwifery degree courses
- Midwifery education - academic and clinical course content
- Preparation for application on a pre-registration midwifery programme
- Financial support while you are at university
- Application forms and the interview process
- Post-registration career development

At the end of the resource is a section that provides additional information and resources, which can help to increase your understanding and awareness. Some of these have been used to compile this information; others are well known resources used within midwifery practice and education.

The role of the midwife

The Nursing and Midwifery Council (NMC) is the statutory body that oversees the educational content of university courses leading to a Degree in Midwifery. The NMC is also responsible for confirming the professional registration of each midwife upon qualification and ensuring their continuing competence throughout their ongoing midwifery practice. This framework is vital in making sure that each woman and her baby receive safe, competent care from skilled and knowledgeable midwives during pregnancy, childbirth and into the postnatal period (NMC 2004).
A definition that sets out the role and responsibilities of a midwife on an international level has also been agreed by the International Confederation of Midwives (ICM 2005). This organisation represents the professional status of midwives worldwide.

**Definition of the midwife**

‘A midwife is a person who, having been regularly admitted to a midwifery educational programme, duly recognised in the country in which it is located, has successfully completed the prescribed course of studies in midwifery and has acquired the requisite qualifications to be registered and/or legally licensed to practise midwifery.

The midwife is recognised as a responsible and accountable professional who works in partnership with women to give the necessary support, care and advice during pregnancy, labour and the postpartum period, to conduct births on the midwife’s own responsibility and to provide care for the newborn and the infant. This care includes preventative measures, the promotion of normal birth, the detection of complications in mother and child, the accessing of medical care or other appropriate assistance and the carrying out of emergency measures.

The midwife has an important task in health counselling and education, not only for the woman, but also within the family and the community. This work should involve antenatal education and preparation for parenthood and may extend to women’s health, sexual or reproductive health and child care.

A midwife may practise in any setting including the home, community, hospitals, clinics or health units’ (ICM 2005).


Once qualified, registered midwives have direct responsibility for their actions; this is called ‘professional accountability’. This involves midwives undertaking, on their own responsibility, the care of a woman who has no apparent complications in her pregnancy, without needing to refer to, or obtain consent from, a medical practitioner about the plan of care. As a result of this, a midwife can be self-employed and choose to practise outside the National Health Service (NHS) as an Independent Midwife. However, all practising midwives are regulated by the NMC through a named Supervisor of Midwives (SOM), who can assist them with updating their knowledge and skills, ensure their practice is safe and competent, and support them in their professional role (NMC 2007a). Currently, midwifery is the only health care profession that has statutory supervision to protect the public from unsafe and incompetent practitioners, as well as promoting the need for continuing professional development through lifelong learning (NMC 2004, 2007b).

If you want to be a midwife, it is important for you to understand what this encompasses for the midwife practising in the UK. The Royal College of Midwives (RCM) is a professional organisation and trade union that promotes the profession of midwifery, as well as looking after employment issues for midwives. The RCM’s website provides very good information about the work of the midwife, also dispelling the common perception that midwives ‘just deliver babies’ (RCM 2007). The place of the midwife within the community is explained, where a midwife is present at every birth regardless of the location for this, highlighting how the involvement of a midwife touches everyone’s life.

A midwife forms a constant contact with health service provision for women during pregnancy, and throughout labour and the postnatal period. Midwives also need to have sufficient knowledge to help women and their partners make informed choices about the services and options available to them. This involves providing clear and relevant information, as well as sometimes requiring the midwife to transpose complex and technical information into a format that the woman and her partner can understand, and use as a basis for their decision making.

The RCM describe the role of the midwife as very diverse, because practitioners are involved in direct care in the form of clinical examinations, screening tests, health advice and parent education. The midwife offers support to the woman and her family throughout the childbearing process, as well as during the first few weeks after the birth when women and their partners are adjusting to their parental role.
The midwifery profession feels very strongly that women should be at the centre of their maternity care and recognised as individuals with specific needs; this underpins much of the organisation, provision and management of UK maternity services. Midwives also need to be able to offer support to women, their partners and families where a pregnancy has not ended in a healthy baby, and where there is a need to acknowledge disability or death. The educational framework of the midwifery degree should enable the qualified midwife to be competent and confident in supporting women in normal childbirth as part of their role. However, midwives will also be required to give care to women who have complications around their pregnancy, birth or afterwards. While newly qualified midwives may not necessarily be competent in the management of the care for these women, ongoing support provided (called ‘Preceptorship’) will help to ensure that they receive guidance and support so that they are able to gain experience which will help develop their confidence and competence in these aspects of care (Standards for Pre-registration Midwifery Education (NMC 2009b)).

The role of the midwife has evolved considerably over time. If you are interested in the history of midwifery, or the current framework that regulates midwifery in England, Wales, Scotland and Northern Ireland, suggestions for further reading are provided at the end of this resource.

Who can be a midwife?

Application for a midwifery course is no longer subject to a minimum age requirement and is open to anyone holding the academic qualifications required for course entry. However, the educational and Health and Safety requirements mean that in reality, the youngest applicants are approaching 18 years at the point of entry to a midwifery degree programme. The Health and Safety at Work Act 2004, defines a young person as: ‘any person who has not attained the age of 18 years’ and the manner in which young people may be deployed to work is restricted by this legislation (NMC 2009b). There are no gender specifications either, although there are considerably fewer men than women working as practising midwives. Information from the NMC shows that at 31st March 2008, there were just 132 male midwives registered to practice, compared with 35,169 female midwives (NMC 2007b). If you have an interest in the background to male midwives, there is more information about this in the additional information section at the end of this resource.

What are the qualities needed to become a midwife?

Being a midwife is an inspiring and immensely fulfilling role that requires someone who is able to develop a relationship of trust and confidence with those in their care. Every day is different, bringing with it assorted experiences and challenges, and midwives needs to have the skills to be able to respond to all of these appropriately and competently.

Any role that involves care for another person will require kindness, intuition and empathy, as well as a certain degree of objectivity. It is this objectivity that enables a midwife to act as an advocate for women, while also being flexible and adaptable to each woman’s individual circumstances and needs. Being a midwife means being able to take responsibility for your own actions, as well as recognising when to refer to others for assistance and guidance. This results in being able to communicate effectively and work in partnership with your peers, as well as with other allied health care professionals and agencies. It is essential that midwives are accepting of women and the circumstances in which they live. Midwives should treat all women and their partners with respect, irrespective of class, creed, economic status, race, sexuality or age, seeing them as individuals and tailoring their care appropriately.

By attaining the standard of a professional, this also requires you to maintain accurate, legible and contemporaneous documentation, as evidence of the care you have given. This includes recording the clinical indications for this care, as well as any information/advice that you have offered, and, where it is appropriate, that the woman has given her informed consent. Guidance on record keeping for nurses and midwives is available from the NMC website; details of NMC publications can be found at the end of this resource.
Entry requirements to midwifery degree courses

It is usual for degree courses to ask for at least the equivalent of two A levels with a range of broader entry requirements usually considered. There must also be evidence of literacy and numeracy (NMC 2009b). Some universities will have broader entry requirements where the applicant has not had the opportunity to undertake A levels, and will accept alternatives; one example is successful completion of an Access course (see below). Application for entry to these courses is very competitive, as can be seen from the wide age band for applications and while many students have higher than minimum educational requirements, others may have had more extensive life experiences. Each university has its own specific criteria, so it is best to check with the individual institution.

Access courses

The main aim of Access programmes is to prepare adult learners without formal qualifications for admission to undergraduate education. For entry to midwifery courses, ‘Access to Health and Social Care’ courses are most applicable. When applying for Midwifery, you must have evidence of having successfully completed a FULL Access course.

The Access course should consist of at least four modules (to include Anatomy and Physiology, the Social Sciences - Psychology, Sociology and Social Policy, Midwifery Studies and Study Skills). These courses are available as both full- and part-time options and once successfully completed lead to the award of an Access to H.E (Higher Education) Diploma, which is recognised by universities as an alternative to A levels.

Higher Education Institutions (HEI) may differ in the credit level requirements for this course and individuals are advised to check with the HEI they wish to attend.

For more information on educational requirements please see the appropriate section at the end of this resource.

Midwifery education: academic and clinical course content

Since September 2008, the course available that leads to a qualification as a Registered Midwife (RM) is a degree course undertaken at a university. The title given to this is usually a pre-registration midwifery programme, which comprises integrated study of theory and supervised midwifery practice. On successful completion, students are awarded both an academic (Bsc (Hons)) and a professional qualification (RM). Therefore, the student must be successful in both their academic and clinical work assessments in order to complete their degree and qualify as a midwife.

All midwifery degree programmes should be at least three years in length and each year should have 45 programmed weeks (NMC 2009b). Annual leave is often linked to periods of study as well as being divided between Christmas, Easter and the summer breaks. Supervised midwifery practice makes up at least 50% of the programme and takes place in both community and hospital settings. Theoretical study and clinical experience cover all aspects of antenatal, labour, postnatal and neonatal care. This initially focuses on the care of women and their babies who have ‘normal’ uncomplicated pregnancies and births. The course content then progresses towards the needs of women and babies who have ‘complicated’ pregnancies and births, which require a more intensive approach to care often provided by a multidisciplinary team. For the final year, there is usually a return to the care of women with normal pregnancies in order to consolidate the knowledge and experience gained. The overall aim remains, however, to provide individualized care that involves women in the decisions being made and integrates a holistic perspective.

As part of the requirement to experience a range of clinical care, you will be given ‘clinical placements’ which could be over quite a wide geographical area. It is very important that you know where you could be located and whether you have any choice in this, especially if you have family commitments or transport constraints. Once you have been accepted for, or have started the course, it is very difficult to change these placements.
Clinical midwifery experience will include practice placements on neonatal care units and some universities will also offer clinical experience on a general hospital ward; this tends to be in gynaecology (diseases/conditions affecting the female genital tract) and offers the opportunity for midwifery students to observe medical and surgical approaches to the care of women with gynaecological conditions, some of which have arisen as a result of pregnancy and childbirth (European Parliament and the Council of the European Union 2005).

The nature of woman-centred care means that an essential part of a student’s clinical learning is that they experience the full cycle of ‘round the clock care’. This involves undertaking shift work and duty rotas that include weekends and night duty. The student’s work pattern will often be linked to the shift patterns of one or two registered midwives working in the same clinical area, whether this is hospital or community-based, or across both (‘integrated care’). These midwives are allocated the responsibility of ensuring that the educational objectives of each student’s clinical placement, including the completion of relevant clinical assessments are met. The midwives who undertake this role are called ‘sign off’ mentors and are given additional training before they fulfil this responsibility.

Wherever possible, the clinical area will try to ensure that you work with the same midwife/midwives during your placement, so there is continuity in the support you receive and in the assessment of your progress.

Another route into midwifery is through a programme called the Pre-registration Midwifery short programme (formerly the post-registration 18 months course). This is for registered nurses who wish to undertake an additional programme of education and gain a second professional registration. The course comprises a minimum of 78 weeks full-time education.

Preparation for application on a pre-registration midwifery programme

If you are interested in becoming a midwife and you have not had previous experience of giving direct care to someone with health needs, it might be an advantage to organise some form of experience in this area before applying for a course and/or attending for interview. Some midwifery units will offer the facility for you to spend a few days observing the work that midwives undertake, but this is becoming increasingly uncommon where greater precautions are now taken to ensure the safety and security of women and their newborn babies. As an alternative, it may be helpful to contact your local maternity unit and ask if you can arrange to speak with one of the midwives about their role.

An alternative, if your personal circumstances would permit this, is to work as a Health Care Assistant (HCA) for a few months, even where the work is not primarily related to midwifery. This type of experience can help to demonstrate your interest and commitment towards becoming a midwife. It can also help you gain a better understanding of health care provision, as well as experience of working in the clinical environment, and as part of a wider multi-professional team. If that is not possible, public sector working such as finding out and getting involved in local support groups for women in pregnancy and for new mothers might also help with your application.

This advice is given in order for you to have an understanding of what constitutes care and support in a formal, statutory environment, such as the NHS, as well as those formed from community initiatives. It is important that you are aware that the role and responsibilities of qualified nurses are different from those of qualified midwives. This is quite a complicated issue which revolves around what the midwife is legally able to undertake on their own responsibility (‘professional autonomy’), without needing medical direction or consent.

Although this is changing in some areas of nursing practice, midwives consider that they have a different level of responsibility and so, it is never appropriate to refer to a midwife as a nurse or vice versa. What does need to be recognised however, is that nursing - as a form of care - will...
on occasions be undertaken by midwives. However, nurses are not legally approved to undertake midwifery care where this involves midwifery observations and direct clinical care to the woman and her baby.

Financial support while you are at university

Means tested bursary: If you are undertaking a pre-registration programme, you can apply for a means tested bursary. This takes into account your age and your access to income. The basic rate of means tested benefits including student loans is between £3,485 and £5,430. Students can access student loans, older students’ dependants’ allowances and other benefits, as can any other higher education student.

Seconded/NHS contracted places: This really only applies to those with an existing nursing qualification, who are applying for pre-registration midwifery shortened courses. A small number of student places are contracted by NHS Trusts that fund the students taking these places. These students are paid a salary by the Trusts and are offered employment within the Trust upon successful completion of their course.

Those applying to an approved midwifery programme which will attract NHS financial support, will find that contact with the university is usually Trust initiated.

To be eligible for financial support from the NHS, you must meet certain criteria. The NHS Student Bursaries’ website at www.nhsbsa.nhs.uk/students gives comprehensive advice on the following:

- eligibility requirements
- what financial support is available
- an online bursary calculator
- how the process of applying for financial support works
- frequently asked questions
- details of the maternity support award.

Application forms and the interview process

Applying for a course

When you have received all the application documentation, it is important to make the most of your first opportunity to gain access to this course. This means making every effort to complete the form correctly, neatly, legibly and truthfully. Make a copy and have a practise run first; it is a good idea to then get this looked at by someone else for spelling mistakes and errors and then, when you are happy with it, complete the final form. It is a very good idea to keep a copy of this as you are likely to be asked questions about your past experiences and any statements you have made on your application at your interview. Applications for degree programmes should be submitted to the University and Colleges Admission Service (UCAS) in the autumn of the year before the course starts. Further information on UCAS is given at the end of this resource.

If you are not successful in being selected for interview, it is reasonable to at least try to get some feedback from the university about the reason(s) for this. However, this information is not always forthcoming and so it might be helpful to seek advice from someone who is involved with either the NHS or the university environment to see if they can help you identify any reasons from your application. However, if you REALLY want to be a midwife, such a small thing as falling at the first fence should not deter you and the advice is always to try again...and this might be again and again. If you are persistent you really should get noticed and hopefully, if you have the correct requirements, you will eventually be invited for an interview. If the process has gone on for too long, you might also consider looking at an alternative university, but it is important to ensure that the course meets your needs, especially if this involves travelling some distance from your home.

The interview

If you are invited for an interview, you should have some time to prepare for it, and you should be given some information about what it will entail. Interviews vary, but often involve some general discussions, group work and role-play. Some universities ask you to complete a timed
written essay on a topic which you should have been given information about prior to the interview. Interviewers are looking for candidates with personalities who will work well within a group/cohort of students. It is therefore important to participate appropriately in these activities to demonstrate your ability to work as part of a team, as well as showing your leadership qualities. There needs to be a balance between dominating the group or discussion but also being noticed. It is a good idea to think about this and consider any past experiences you have had and how you have reacted to such situations in the past. If it has been some time since you were in the academic environment, you might be feeling a bit lacking in confidence, but this is all taken into account and the best advice is to be yourself. The interviewers will also be looking for students who are self-directed and who can prioritise their workload and manage their time effectively.

As well as the above, there will be a face-to-face interview, usually with at least two interviewers who are likely to be a university lecturer and a practising midwife. To make the most of yourself during this interview, you should prepare in advance so that you are well informed about recent news related to midwifery, infant and other health care related issues. This might mean watching the news and reading the papers for a few months beforehand. It may even be worth subscribing to a midwifery journal, such as the MIDIRS Midwifery Digest (www.midirs.org), and also reading a few textbooks about midwifery and childbirth before you go for interview, or looking on the internet for useful websites. You can ask your local library for help if they do not have the books you need. MIDIRS hosts a discussion forum on its’ website (www.midwiferyforum.org) where you can get an idea from current students about their experiences of being a student midwife. There are also websites for women who are pregnant or who have recently had babies; these websites might give you an insight into what motherhood is like if you have not yet experienced this for yourself, or what it is like for others where you have. All of this preparation will make sure you have a good understanding of the role of the midwife and what support they can offer new parents. Then, if you are asked what a midwife does, you will be less likely to respond “delivers babies” but will instead be able to demonstrate that you have a sound understanding of what the role actually involves.

The courses are demanding as you will be undertaking academic study whilst also working clinical shifts. You therefore need to be able to demonstrate that you have an understanding of the rigours and demands of the course, that you are able to organise your time effectively and that you have as much support as possible from your partner, family and friends.

There is great competition for each student place and you are likely to be told that for every place available on the midwifery course, there are three or four people applying. This is why you need to be able to convey your strong commitment to the course and to your future midwifery career. Then the university can see that the place will be safe in your hands and why you are the one to offer it to.

General advice in preparation for your interview is that you:

- Ensure you meet the requirements of the university
- Have a clear understanding of the course programme content
- Keep a copy of the application form and be conversant with what you put in it!
- Be able to support the reasons why you wish to become a midwife
- Give thought to answering any questions and avoid single responses (yes/no) where more information is needed. Most questions will be designed to ask you how or why you think something – be prepared to give a detailed answer
- Be prepared to ask a few relevant questions about the course.

Reiterating our previous advice: should you fail to be invited for interview, it is important not to become downhearted. The competition for every midwifery student place is immense and there will be several other applicants also pursuing their dream of becoming a midwife. It is important to regard the whole application process as a positive learning experience. Try to get some feedback from the university if you can, and then, apply again - and try again...and again - until you succeed!
So you want to be a midwife?

Post-registration career development

As part of the preparation for your application and interview, it is perhaps also important to know about life after registration. This will enable you to better appreciate what you are working towards, as well as understanding the status of the midwives who are teaching and supporting you.

A midwife’s salary is paid within pay bands. Full-time work is 37.5 hours per week. Part-time and flexible contracts may be available, as some midwives opt for the flexibility of bank work. Some midwives choose to work more than the basic 37.5 hours a week through overtime or bank midwifery schemes. Work at weekends and overnight qualifies for additional allowances. Qualified midwives usually get six weeks’ holiday per year in addition to 10 bank holidays. These can be taken at any time according to individual contractual arrangements. You can find out further information on this through http://www.nhscareers.nhs

A midwifery qualification and ongoing clinical experience will open a wide range of options for you that will enable you to develop your health career in the direction that interests you most. As part of the midwifery programme, you will experience the very diverse aspects associated with childbearing and child rearing, as well as a range of health and social issues that you might not have considered previously.

You might also choose to work abroad; at present midwives who are registered in the UK are entitled to full registration in all other countries in the European Economic Area. There is also access to other centres through the International Confederation of Midwives (ICM) and Voluntary Service Overseas (VSO), or other reputable charities. Information about these services can be found on the following websites: http://www.internationalmidwives.org http://www.rcm.org.uk/college/international/:Thinking about working abroad? http://www.vso.org.uk. http://www.nhscareers.nhs.uk/midwife.shtml [Accessed 18 August 2009].

NHS Careers. Careers in detail - Midwifery – Future careers options

References

(Where the most relevant information is obtainable online it is this information that has been given rather than a hard copy publication.)


Nursing and Midwifery Council Publications: All of these can be viewed on the NMC website www.nmc-uk.org or obtained from 23 Portland Place London W1B 1PZ.

Tel: 020 7637 7181


So you want to be a midwife?

Additional information and resources

Royal College of Midwives – Student midwives – Student midwives funding
The Royal College of Midwives
15 Mansfield Street
London
W1G 9NH
Tel: 020 7312 3535

Royal College of Nursing
This is a professional organisation and trade union for nurses, midwives and other branches of the nursing profession. There is a midwifery section called The Midwifery Society and support is offered to student midwives who become members. You can visit their website on www.rcn.org.uk, write to them at
20 Cavendish Square
London
W1G ORN
or phone them on 020 7409 3333.

The RCN also have a career and welfare advice line, Tel: 0845 408 4391 (Opening times: 9.30am-4.30pm weekdays), Fax: 0207 647 3589, Email: careeerandwelfare@rcn.org.uk, Website: http://www.rcn.org.uk/support/services/welfare_rights_and_guidance

The RCN Career and Welfare Service offers:
- career guidance
- help with CVs and application forms
- advice on debt management, negotiating with creditors
- advice on welfare benefits and tax credits
- advice on housing issues.

MIDIRS Midwifery and Pregnancy Forum
http://www.midwiferyforum.org/

Independent Midwives UK - The former Independent Midwives Association has recently become Independent Midwives UK, an Industrial and Provident Society. The new organisation is a Social Enterprise and with government support, Independent Midwives UK is working towards making independent midwifery available to all women who are entitled to NHS maternity care. This will be achieved by contracting their services to Primary Care Trusts (PCTs).
http://www.independentmidwives.org.uk.

Counselling Services

Personal tutors to midwifery students have a pastoral component to their role and are available for support and guidance. Each university should offer a confidential students’ counselling service; however, support is also available through the nominated local Supervisor of Midwives (SOM) within each NHS Trust and through the Royal College of Nursing (RCN), which offers free professional counselling for members and student members on work-related or personal matters: Tel: 0845 769 7064 (9am - 4pm Monday to Friday). You can also contact the Health and Learning Skills Advice Line: Tel: 08000 150 850 (8am – 10pm Monday to Friday) or see http://hlas.careers-advice.org.

Information on course details and applications

Health Learning and Skills Advice Line: http://hlas.careers-advice.org. Tel: 08000 150 850 (8am – 10pm Monday to Friday).

Provides careers information, guidance and advice to support people who work in, or are considering, a career in health care; the service is run by the Careers Advice Service and covers the entire health care sector.

So you want to be a midwife?

This site provides careers information, guidance and advice to support people who work in, or are considering a career in health care; the service is run by the Careers Advice Service and covers the entire health care sector.

University and Colleges Admissions Service (UCAS)

Rose Hill
New Barn Lane
Cheltenham
Gloucestershire GL52 3LZ

Tel: 01242 222 444

Website: http://www.ucas.ac.uk

UCAS handles all degree applications. As well as information about universities, this site includes a searchable database of university access courses.

For information on finding a Pre-Registration Midwifery Degree course, go to: http://www.nhscareers.nhs.uk/details/coursefinder/FindCourse.aspx

For a list of universities, with contact details and course codes, go to: http://search.ucas.com/cgi-bin/hsrun/search/search/StateId/DwFNKw6P56yG9SeTbO9zqrOTJ8-Vf5g/HALTpage/search.HsKeywordSearch.whereNext?query=439&word=MIDWIFERY

For further information, including a list of institutions offering relevant courses, please go to: http://www.ucas.ac.uk/students/beforeyouapply/access_programmes/

For information on entry requirements for those educated outside the UK and Eire, please contact the NHS Careers Service: NHS Careers. Tel: 0845 606 0655, Fax: 0845 850 8866 or visit the website: http://www.nhscareers.nhs.uk/contact_overseas.aspx

For specific advice on bursaries: http://www.nhsbsa.nhs.uk/967.aspx or write to:

NHS Student Bursaries,
Hesketh House,
200-220 Broadway,
Fleetwood,
Lancashire,
FY7 8SS

Tel: 0845 358 6655
Fax: 01253 774490

Information on the history of midwifery

Midwifery history and how it relates to practice today:

The impact of men in midwifery

The first male midwives, known as ‘man-midwives’ appeared in the 16th century, with their position in midwifery being consolidated when the medical acts of 1858 and 1886 were passed. However, the Midwives Act of 1952 prohibited men from midwifery until 1983 when legal restrictions were lifted after a long legal battle and fierce opposition from existing female midwives and women in general. Although male practitioners in the field of midwifery may still face rejection and suspicion, men have been successful in the profession and a growing number of women who have been attended by them argue that character, communication skills and a caring attitude towards women are more important than gender.


So you want to be a midwife?

Reading list - midwifery – its background and challenges


MIDIRS information resources

If you have found the information in this document useful, you may find MIDIRS other resources of interest. A range of evidence-based information, learning activities and practical tools designed to support students and health care practitioners with their learning needs is available. All content is peer reviewed and is designed to help develop knowledge, theory and understanding of midwifery, academically and in practice. For details:

Visit www.midirs.org/student

Email enquiries@midirs.org

Freephone 0800 581 009 (UK) or +44 117 9251791 (overseas).