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**Introduction**

In accordance with Omowaleola (2013), the fourth millennium goal is aimed at reducing child mortality to its two thirds by the year 2015. On the other hand, the fifth millennium goal is aimed at reducing maternal mortality to its three quarters by the year 2015 (Omowaleola, 2013). Cheyne et al (2013) indicates that access to quality midwifery healthcare has been recognised as the most cost effective method of working towards fulfilment of both these goals. Turkmani et al (2013) also indicates that maternal and child health services provided by midwives serve in building community health networks and delivering meaningful health messages. Midwives are successfully able to improve maternal and child healthcare outcomes as they are able to establish a personalised relationship with their clients, access their needs, conditions and customs of their community and provide help accordingly (Turkmani et al, 2013). Therefore, midwifery services are extremely important facilitators of sound maternal and newborn health.

In light if the above discussion, this essay is aimed at arguing that midwives and midwifery practice is strongly working towards the fulfilment of millennium development goals 4 and 5. So as to appropriately argue the point, both Australian as well as global perspectives on the importance of midwifery practice would be presented. Resource poor countries would be given special consideration.

**Australian Perspective**

Kildea et al (2010) indicates that midwives can play an active role in significantly improving maternal and infant health in Aboriginal and Torres Strait Islander mothers. The article further indicates that the role of a midwife might be enabled to provide comprehensive and quality care. This quality care might be provisioned within an all inclusive team of the woman giving birth, community in which the woman lives and medical colleagues. Recognising the importance of midwifery in improvement of maternal and newborn health, the article clearly indicates that it is essential that appropriate funding strategies are designed so as to evenly spread caseload midwifery and group midwifery practices throughout the country. Finally, it has been mentioned that it is extremely important to realise the importance of midwifery so as to improve maternal health outcomes of women giving birth in the Aboriginal and Torres Strait Islander community of Australia.
Kelly et al (2014) also recognises that midwives are strongly working towards improvement of maternal and newborn health in Australia. The article identifies four major themes in support of the article. The first theme suggests that midwives are able to communicate in a professional manner keeping in mind the aspect of ‘shame’ that is popularly felt by women of Aboriginal and Torres Strait Islander origin. The second theme expressed in the article suggests that student midwives were able to create positive and trustworthy relationships between them and the women. These relationships then enabled them to encourage women to access professional services. Third theme expressed in the article elaborates on the aspect of support. Women in the community valued extra support they received from midwives and thought positively of them. Finally, the fourth theme suggested that student midwives were successfully able to change their thinking about the healthcare system and help them in accessing the system with positive expectations.

Barclay et al (2014) also agrees with the other two articles by suggesting that midwives are actively working towards fulfilment of millennium goals 4 and 5. The article recognised that there are several problems with the healthcare delivery system in Australia and these account for poor maternity and newborn health services to women (especially of Aboriginal origin) in Australia. In order to improve the situation of maternal healthcare delivery, the authors of the article designed an intervention consisting of Aboriginal healthcare workers, a senior Aboriginal woman, Aboriginal midwifery students and professional midwives. The intervention targeted two specific communities and provided care to women with the help of a primary midwife and designated midwives. Findings of the study indicated that this intervention registered marked improvements in aspects including maternal record keeping, antenatal screening and a reduction in foetal distress during labour. Overall women from targeted communities agreed that help received from experienced midwives is highly valuable thereby establishing the importance of midwifery practice for improved maternal and newborn health outcomes.

**Global Perspectives**

Evidence from across the globe has also widely supported the Australian perspective about midwifery practice. Importance of midwives and their practices for fulfilment of millennium goals 4 and 5 has been established globally.
Ngongo et al (2013) conducted a study in Sierra Leone, a country with an extremely limited number of midwives responsible for provision of skilled birth attendant coverage throughout the country. The article acknowledges that midwives are an extremely important part of healthcare delivery and are often involved in providing life-saving care to woman and their babies. In this respect, the article acknowledges that the situation in Sierra Leone is not favourable and midwifery workforce in the country needs to be increased by 12 times of its current level. The article also mentions that since midwives work tirelessly towards the provision of quality healthcare delivery, it is essential that a supportive environment is facilitated for allowing them to function to their full capacity. Finally the article stresses the importance of constant skill upgrading for midwives and suggests that in some communities their role as a care provider supersedes that of a general practitioner. It might be concluded from the article that midwives and their practices are completely dedicated towards fulfilment of millennium development goals 4 and 5.

Kempe et al (2013) collects evidence from Yemen and suggests that women often underutilise professional maternal health services that are available to them. This might be attributed to the fact that women in the country are undereducated and have limited income and decision making capabilities with them. Women are also often unaware of services that might be professionally available to them. Under these circumstances, midwives play crucial roles of educating women on safe birth practices and effectively reduce the gap between women and professional services. Midwives also help in reducing maternal morbidity during and soon after labour by providing required valuable assistance to them. Questions are asked in an empathising and comforting manner thereby enabling women to share information freely. Midwives therefore are an extremely important part of quality maternal healthcare delivery in the country.

Turkmani et al (2013) collects evidence from Afghanistan and agrees with the evidence base in suggesting that midwives and their healthcare practices are the key to achieving millennium development goals 4 and 5 in the country. In this context, government in Afghanistan has invested heavily over the last decade while attempting to increase the number of midwives in the country. Midwives interviewed for the purpose of this study revealed that care that they provided was highly valued in some of the extremely conservative communities and introduction of midwifery programs in the country had led to development of a new trend where women from very conservative communities could now be seen outside their homes. Women could be seen taking
their own decisions and asking about available healthcare options in the country. A small amount of women who had seen a midwife during their pregnancy were extremely satisfied with their experiences and were grateful for the care that they would receive.

McCool et al (2013) collected evidence from U.S.A (a resource rich country) so as to further establish the importance of midwifery practice for improvement of millennium development goals 4 and 5. The article presents evidence against popular thinking that U.S healthcare system is among the best in the world. Using Philadelphia as an example, the article suggests that the country is not progressing towards fulfilment of millennium development goals 4 and 5. This might be attributed to the fact that number of caesarean sections is constantly increasing in the country coupled with a decrease in antenatal care provided. It has been proposed that an increase in the number of midwives in the country is required so as to be able to restore the quality of maternal care provision. Recognising the importance of midwife led care further, the article acknowledges that midwives are able to establish trusting relationships and empower women in the community.

Binfa et al (2013) provides further evidence in favour of midwives in Chile. The study establishes the importance of midwives in fulfilment of millennium development objectives in the country. Elaborating on the aspect of care provision by midwives, it has been suggested that their biggest strength lies in provision of humanistic care to all individuals. Midwives are genuinely interested in caring for women in the community that they are associated with and are well equipped to recognise their specific needs. The article further mentions two Chilean studies where women have specifically mentioned that their basic understanding to well being during their labour consisted of being treated as individuals, being valued as individuals and receiving respectful care. These studies have also mentioned that midwives are able to understand these concerns and adjust their care provision accordingly.

Cheyne et al (2013) tends to realistically examine a midwife led program in Scotland so as to provide evidence in favour of effective maternal and newborn healthcare provision in the country. The article begins with an enlightening introduction clearly specifying that midwife led care has always been found safe and effective in reducing complications during and after labour. In this context, Scottish Government has undertaken every possible step to maximise the role of midwife in the community as a care provider. The article acknowledges that supporting midwives in their care delivery is the key to safe and reliable maternal healthcare practices. The article however also
acknowledges that despite efforts by the Scottish Government, implementation of role maximisation of midwives in the community has been inconsistent and this is responsible for negatively affecting health outcomes of mothers and new born babies in the country.

Lori et al (2013) has collected evidence from north-central Liberia in favour of midwives and role played by them in promoting millennium development goals in the country. The concept of maternity waiting homes and their contribution towards improving maternal and newborn health outcomes have been examined in the article. Furthermore, the article also discusses socio-economic barriers which prevent women from accessing healthcare services available to them in the society. The article concludes by suggesting that midwife led maternity waiting centres are a boon to improving healthcare access in the country. Midwives while providing care in maternity waiting homes are able to significantly improve acceptability, affordability and accessibility of maternity services. Maternity waiting homes also serve to improve economic viability of healthcare services thereby increasing frequency of usage.

Omowaleola (2013) presents strong evidence from Nigeria in favour of midwives working strongly towards achievement of millennium development goals 4 and 5. Nigeria being a signatory to the Millennium Development Goals has put in various strategies to actually conceptualise the implementation of these objectives throughout the country. One of these strategies is the introduction of Midwifery service scheme. Main objective of this scheme is to increase the proportion of pregnant women receiving antenatal care from 60 to 80%. Reducing maternal mortality and neonatal mortality are other significant objectives of the scheme. It is expected that implementation of this and similar basic midwifery programs in the country would serve to promote independent decision making, provide appropriate care including on aspects such as family planning and refer pregnancies that are at high risk or might develop complications at a later stage.

**Conclusion**
Looking at the above discussion, it might be concluded that midwives and their practices are highly geared towards the fulfilment of millennium development goals 4 and 5. Evidence collected strongly indicates that midwives are well equipped in recognising individual care needs
of individuals and providing humanised care to every unique individual. Midwives also serve to
empower women in the community, promote independent decision making, male healthcare more accessible and affordable and promote safety. Midwifery practices have also been widely recognised as the key to better maternal and newborn health in various countries across the globe.

**References**


