

211. Protecting Normal Birth Through Workforce Policy: Continuous Professional Development and the METIS Project



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Background

Normal labour and birth depend not only on clinical guidelines, but also on midwives who are professionally autonomous, psychologically supported, and organisationally empowered to practise in accordance with midwifery philosophy. Across European maternity systems, rising burnout, restricted autonomy, and workforce attrition increasingly threaten the capacity to sustain woman-centred care and represent a structural risk to normal labour and birth [1-3]. Within this context, Continuing Professional Development (CPD) should extend beyond a compliance-driven licensure requirement. When protected, funded, and embedded within supportive organisational and leadership cultures, CPD can strengthen professional identity, autonomy, wellbeing, and workforce retention [4,5].

Aim

To reframe CPD as a strategic mechanism for midwifery workforce sustainability and the protection of normal labour and birth, and to highlight the Erasmus+ METIS project (2025-2028) as an ongoing European initiative exploring structured transition support, mentoring, and reflective professional development.

Methods

Contemporary evidence on midwifery wellbeing, professional development, and workforce sustainability was conceptually synthesised to examine CPD across three interrelated domains: technical-clinical, reflective-relational, and organisational.

This perspective is considered alongside the ongoing Erasmus+ METIS project (2025-2028), which explores how structured transition support, mentoring, and Eportfolio-enabled reflective development may support midwives' professional development within a workforce sustainability framework.

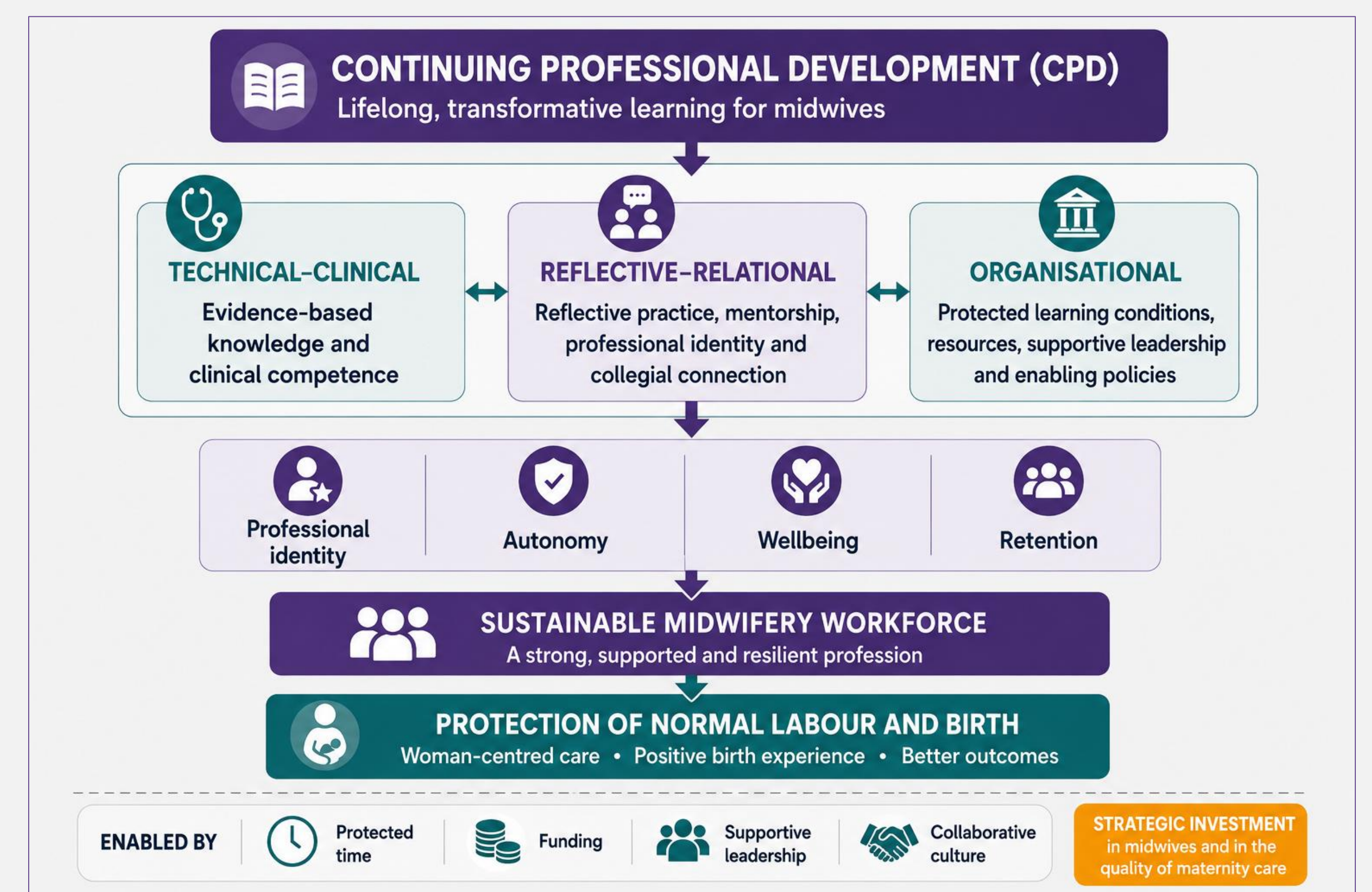


Figure: Conceptual framework linking CPD, midwifery workforce sustainability, and the protection of normal labour and birth.

Results

The synthesis identified three interrelated domains of CPD—technical-clinical, reflective-relational, and organisational—that together shape its contribution to midwifery workforce sustainability. Evidence suggests that CPD is most beneficial when learning extends beyond technical competence to include reflective practice, professional relationships, mentorship, and organisational support [4]. When CPD is protected, funded, and embedded within supportive leadership cultures, it can strengthen professional identity and autonomy, reduce professional isolation, and support workforce retention. In contrast, continuing education undertaken without protected time or adequate organisational support may increase workload and work-family conflict, contributing to exhaustion and professional disengagement [2,6].

Structured development planning and access to clinical facilitation and mentorship may therefore be important mechanisms for supporting midwives throughout their professional trajectory [5,7]. Within this framework, the ongoing METIS project explores how structured transition support, mentoring, and ePortfolio-enabled reflective development may create supportive conditions for professional development and workforce sustainability across European midwifery contexts. The **Figure** summarises these interrelationships.

Discussion

These findings support a shift from viewing professional resilience and development as the individual responsibility of midwives towards recognising the collective and organisational responsibility to create supportive learning and working environments. CPD cannot effectively contribute to wellbeing and retention when systemic stressors—including chronic staffing shortages, limited flexibility, insufficient protected learning time, and unsupportive workplace cultures—remain unaddressed [1]. Embedding CPD within workforce policy therefore requires organisational structures that promote professional autonomy, psychological safety, mentorship, and meaningful opportunities for reflective learning. This approach aligns with the broader strategic direction of strengthening the midwifery workforce and enabling midwives to practise to their full professional scope. Within this context, the METIS project provides a European framework for exploring how structured transition support, mentoring, and digitally enabled reflective development can contribute to supportive professional environments and long-term workforce sustainability.

Conclusions

Protecting normal labour and birth requires a sustainable midwifery workforce. CPD should therefore be recognised not merely as a regulatory requirement, but as a strategic investment in professional autonomy, wellbeing, and workforce resilience. Policies should ensure protected learning time, adequate funding, structured mentorship and transition support, and organisational environments that enable midwives to develop throughout their careers. Initiatives such as the METIS project offer an opportunity to explore how these principles can be translated into sustainable professional development strategies across European maternity systems.

Ultimately, investing in midwives' professional development and wellbeing is an investment in the quality, safety, and sustainability of normal labour and birth.

Key References

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Funding

