Investigating viewpoints of midwives of type 1 and 2 universities of medical sciences in Iran towards midwives management challenges in 2016

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Abstract

Women in all communities have a special position because they are the basis for family health and the midwives have a special role in their health promotion; nevertheless, the midwives do not have special position in professional decisions field. Therefore, this study aimed to determine the viewpoints of midwives towards the management challenges that they are facing.

This was a descriptive study and data collection was cross-sectional through a questionnaire on demographic characteristics, self-made questionnaire of management challenge in three institutional, cultural and individual areas. The study population consisted of members of the Board commission of Midwifery and Reproductive Health, The members of academic of midwifery department and the midwives of treatment & health adjutancy in eight type 1 and 2 Universities of Medical sciences in the country. The validity and reliability of this tool was determined by content validity and Cronbach’s alpha coefficient and the results were evaluated by inferential statistical test (independent t test).

Results showed that in the views of all the respondents, organizational challenges (the average score of the type 1 university: 71.3, Average score of type 2 University: 69.8) are the most important barriers for midwives in achieving management positions and there is no significant differences among them in giving priority to this challenge (P = 0.64). Based on the findings of this study and according to the priority of the organizational challenge, special role of managers and officials in resolving this barrier is emphasized so by this mean and by reducing this issue the required basis for gradual reduction of other challenges would be provided.

Keywords: job satisfaction, midwives, women, managers, Iran
Introduction

Women in all communities have a special position because they are the basis for family health and in addition to management of family members; they are the basic pattern of education and promotion of healthy lifestyle for the next generations. So investing in health of these people as one of the main recipients of health care services is an investment in future generations so that it can be considered as a guarantee for health of future generations (Cooper and Fraser, 2014).

Physicians and other professions related to the medical team in particular midwifery community, are responsible for maternal health, so that based on the best performance and the lowest cost they can increase the quality of health care that is provided to mothers. Currently midwives are introduced as the main provider of midwifery as well as the potential effective factor on the reduction of maternal mortality to provide good services by their unique role.

Importance of the role of midwife becomes more prominent according to the Millennium Development Goals to reduce maternal mortality to 75% by 2015 and also due to the orientations of the Fifth Development Plan in accessing to deaths and maternal mortality rate of 15 per 100 thousand people (WHO, 2014; human development index report, 2013).

Maternal mortality rate in Iran in 1975 was 274; in 1995 it reduced to 94, in 2005 to 38 and in 2013 to 20.3 deaths per hundred thousand live births. Although the statistics show a downtrend but it is still far from objectives of the program (Zolali, Haghdoost, 2011 & Hogan and et al, 2011; Pathmanathan and et al, 2003).

In this regard, considering the role of midwives in family and society health through the promotion of maternal and child health index, regarding to the necessity of their presence in the health and Decision-making positions to provide job satisfaction for colleagues, is the major factor in boosting the efficiency, productivity and providing optimal services. Sullivan, Homer and Locke in Australia, suggested that job satisfaction is a potential effective factor for midwives to remain in their jobs and job satisfaction has caused more sense of pleasure from the job and honor to the profession of midwifery (Sullivan et al, 2012).

But, in recent years instead of improvement of job conditions, loss of job motivation has been seen between midwives for reasons such as uneven employment of human resources compared to other medical majors, management of hospital midwives by nursing services, non-utilization of midwives from facilities of hardship payment and job burnout, lack of insurance organizations commitment to insurance contracts with midwives and many other reasons. This issue in addition to creating job conflicts within midwives can affect service delivery in the area of health indicators.

Midwives are the main owners of their profession in policy and decision-making to improve the health of vulnerable groups in society and their absence in executive areas is considered as a management weakness.

Shaban & et al (2012) investigated the related barriers to the development of the profession of midwifery and found that factors such as lack of recognition of the status of midwifery in society and dominance of physicians in the health system can be effective in the lack of recognition and lack of midwives motivation.

Unfortunately, our country has this problem as well. Presence of general practitioners which often does not have necessary knowledge about capabilities of midwives and indicators relevant to their field of activity has narrowed the decision-making opportunities for midwives, and area for midwives to achieve management positions for many of whom are graduates of master's and PhD. evidence for this is that so far no exact statistics are registered.
about midwives appointed in different management hierarchy which certainly is due to the lack of managerial posts for this job category.

Shaban (2012) in the results of their research entitled barriers to the development of midwifery as a primary health care strategy found that there is an absence of midwifery leaders (those who can communicate directly with other senior officials) in the organizational hierarchy and also educational levels, while presence of these people could lead to the creation of positive benefits, such as self-confidence, interpersonal skills improvement and being a good practical pattern for midwives.

So having managers with technical expertise can lead to the easier achievement of organization to its goals, better staff guidance and better understanding of the consequences of decision-making in the organization (Seyed Javadin, 2010).

By taking all that has been stated in this study by considering the specific importance of midwives in improving maternal and child health indicators we aimed to facilitate their strong presence in decision-making positions by determining the challenges of midwives and by presenting the results to the authorities and managers to mitigate any barriers.

**Method**

This is a descriptive-comparing study which conducted as two groups, single-stage and multi-variable. The research places were the University of Medical Sciences of Isfahan, Mashhad, Tehran, Shah Kord, Yazd (type 1 University), Kerman, Arak, Zahedan (type 2 University). The research community was composed of members of the Board commission of reproductive health and midwifery, the midwives of treatment and health adjutancy, and academic midwives. Participants were enrolled in the study by census method. Inclusion criteria included being interested in participating in the study and at least 3 years of non-managerial job experience and exclusion criteria were all incompletely filled questionnaires. Sum of 173 participants were calculated in the study which at the end 163 questionnaires were collected based on inclusion and exclusion criteria. Self-made questionnaires of management challenges (institutional, cultural and individual) were used to collect information. The items in the questionnaire in terms of reliability and validity were approved by internal software which is accepted by Ministries of Health, Treatment and Medical Education, Science, Research and Technology. In this regard Cronbach's, alpha was achieved 85 percent. Questionnaire was presented in table form in 5 ranges of Strongly Disagree, Disagree, No idea, Agree, Strongly agree (Likert scale) using inferential statistics (t-test) as quantitative indicators and SPSS software.

In this questionnaire, by organizational challenges in fact we mean strategies that have been taken by authorities, universities and relevant organizations and thus midwives fail to access to management posts and to have useful presence in the professional decision-making positions. Also cultural challenges refer to the inhibiting factors of the society and discriminatory attitudes to women. At the end individual challenges refer to the individual, family, moral characteristics and midwives capabilities that can have great impact on midwives incompetence in being in management positions.

**Results**

Minimum age of subjects was 25 and maximum was 54 years, the majority (73.6 percent) was married with two children (41.7 percent) and had master degree (43.8 percent). Also in terms of employment status a significant percentage was officially employed (69.5 percent) and a significant percentage of them never had management experience (31.9 percent).
The results of this study indicate that the average score of organizational challenges from the perspective of both type 1 and 2 universities is high (respectively 71.3, 69.8) and no significant difference was observed between the two groups in terms of this challenge (Table 1).

In the field of cultural challenges data from the table show that between the two groups there was no significant difference in terms of this barrier and in terms of setting of priorities it is in second place (Table 1).

Finally the values resulted from average score of individual challenges among two groups show that this obstacle has the least impact on accessing to managerial positions for midwives and there is a significant differences between the two groups in terms of this challenge (p = 0.009).

Discussion

The findings from the study showed that in views of both groups (type 1 and 2 University) organizational challenges are the main management obstacle for midwives and there is no significant difference about this obstacle in terms of its prioritizing among respondents.

The results from Kazemi pour and Ja'fari, (2010) study entitled "challenge to women's job promotion in Iran" suggested organizational challenge as a primary barrier to women's access to managerial positions in viewpoint of the staffs and among organizational items, index of giving positions to men was in the priority. According to results of this study managers have a kind of unofficial reluctant to entrust managerial positions to women.

Yazdkhasti and et.al(2010) in their research entitled "East Azarbaijan government agencies employees attitude towards managerial positions by women" found that prevailing conditions on organizations and lack of belief of men staff and managers and even women employees in leadership abilities of women creates unequal conditions of work employment. These general beliefs are spreading in the society while we witness a relative increase in educated women in the country.

The results of the study of Sullivan, Homer and Lock (2010) in Australia about "causes of midwives staying in midwifery jobs in three areas of relationships, professional identity and midwifery practice" show that diversity, flexibility, normalization and standardization of working conditions, adequate resources for optimizing work environment, professional independence, providing favorable conditions for hiring all can affect job satisfaction and staying of midwives in their jobs.

In the field of effective cultural challenge of assignment of midwives in professional management positions, findings of the study show that there is no significant difference in two groups in terms of this barrier and this barrier is a less effective factor in the presence of midwives in professional management positions.

In this regard, Hossein pour& et al (2013) in their research entitled "administrative challenge for women in middle and senior levels" found that cultural challenge are effective on not assigning of women in middle and senior management posts and the highest load factor in the research was related to the item of "indoctrination to the girls that the first duty of every woman is housekeeping and guardianship of husband and children".

In a study entitled investigating the challenge to women's participation in top management positions in the oil industry has shown that women and men both give priority to cultural challenge. From the perspective of women the culture of patriarchy in society and organizations and from men's perspective cultural values and norms of society, are the most important cultural challenge (Kazemi, Dehghanpoor Farashah, 2014)
In this regard, Taghi Zadeh and et al (2013) in their research entitled "identifying challenge to the promotion of women to managerial positions" concluded that, Potential contributing factor in reducing the presence of women in executive management positions are including environmental factors, gender stereotypes and culture of society and the family and not just lack of professional skills.

On the other hand Mir Kamali and Nasti Zadeh (2010) in their research entitled challenge to the promotion of women to middle and high management positions in viewpoint of women school teachers working in Education organization acknowledged that Cultural challenge (differences in gender roles, lack of belief of managers and supervisors in women, patriarchal culture) contribute in lack of women's promotion to intermediate and higher education management positions and family responsibilities and multiple roles (treating husband, housekeeping) on the one hand and women strive for harmony between family and career roles on the other hand, leads to feeling fatigue in them and thus influence their job satisfaction and mental health and reduces their motivation to upgrade to middle and high management posts in education.

Cordano et al (2002) in their research on the subject of attitudes toward women as manager mentioned to the lack of cultural differences in the acceptance of women.

Unlike the Iranian researchers, foreign researcher believes that that cultural barrier is a key factor to women's participation in management positions which undoubtedly this conclusion is because of a different culture that is ruling these countries in comparison with a Muslim country such as Iran.

The data from our study shows that the average score for individual barrier challenge had significant difference among the two groups (p = 0.009) and the highest average score for individual obstacles has been allocated to the type 1 University (28.4) and the lowest to the type 2 University (23.6) and it got third place in prioritization of the challenges. So in general, this obstacle has lowest impact on the field of assignment of midwives in professional managerial positions. From the data obtained from this study it might be concluded that midwives due to sufficient knowledge of the sensitivities and subtleties of their profession are able to take professional responsibilities and tasks, whether in management or non-management areas. On the other hand by over viewing the data from the table of the obstacles it can be understood that the relatively lower average score of individual challenges than the other two challenge (cultural and institutional) shows that all members of the research community believe that four years of theoretical and practical courses of study, qualify midwives for administration and management of high and low job positions. So, an individual obstacle is less effective in the disqualification of midwives in assignment to professional management posts.

The findings of the research of Ali Abadi (2013) show that there was no significant relationship between personal factors and motivation to get management posts.

However, Hosseinpur et al (2013) in their study entitled "challenge to women's access to middle and senior management levels" found that here is a significant and positive relationship between different items of individual challenge and the highest load factor is related to "women's low self-confidence " and the lowest to "men's defiance to reach senior status, respect, power and wealth than women". Accordingly perhaps lack of self-confidence, lack of participation and comment on meetings and not engaging in work also known as challenge that can be effective in lack of women promoting to management positions.
Conclusion

Based on the findings of this study, remarkable high score of organizational challenge than cultural and individual challenge show that all respondents agree that the midwives hold necessary individual and personality characteristics and adequate technique and expertise and can pave the way for making more deliberate decisions by understanding the professional sensitivities. On the other hand given that all members of this profession are women, cultural barrier is less effective. Therefore, taking into account all that was said and given the importance of organizational challenge as the main obstacle, officials and executives are expected to take the necessary actions in order to solve these problems and help midwives to be in professional decision-making positions to improve and maintain the health indicators of mother and child.
References


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Table 1:
Average score of organizational, individual and cultural challenges in viewpoints of midwives

<table>
<thead>
<tr>
<th>challenge</th>
<th>Type 1 university</th>
<th>Type 2 university</th>
<th>Independent t tests</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>M</td>
</tr>
<tr>
<td>Organizational</td>
<td>71.3</td>
<td>14.4</td>
<td>69.8</td>
</tr>
<tr>
<td>Personal</td>
<td>28.4</td>
<td>19.5</td>
<td>40.7</td>
</tr>
<tr>
<td>Cultural</td>
<td>40.6</td>
<td>15.7</td>
<td>46.8</td>
</tr>
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